E K Russell 664a

Vol. XVIII. No. 11

THE CANADIAN NURSE

AND HOSPITAL REVIEW

Owned and Published Monthly by the Canadian National Association of Trained Nurses

PRINTED BY EVANS & HASTINGS, VANCOUVER, B. C.

Registered at Ottawa, Canada, as Second-Class Matter

NOVEMBER, 1922

	Page
National Memorial Committee of the C.N.A.T.N.	669
Government Annuities versus Life Insurance	672
The Operating Room—Equipment, Care, Supplies	673
Saskatchewan Registered Nurses' Association	678
Address at Graduating Exercises Second Attendants' Course	680
A Moral Prescription	683
Lectures on The History of Nursing	690
Editorial	695
Public Health Nursing Department—	
The Development of the Public Health Nursing Department of the "Canadian Nurse"	696
Our Nurse	699
Reports on Public Health Nursing from the Provinces of Manitoba and British Columbia	701
Department of Nursing Education—	
Report of the Canadian Association of Nursing Education held in Edmonton, Alta., June 23rd and 24th, 1922	704
Hospitals and Nurses	708

All Communications to be addressed to the Editor and Business Manager, Vancouver Block, Vancouver, B. C.

Subscription, $2.00 a Year **Single Copy, 20 cents**

Entered as second-class matter March 19, 1905, at the Post Office at Buffalo, N. Y., under the Act of Congress of March 3, 1897.

NEW

FROHSE ANATOMICAL CHART NO. 10

MALE AND FEMALE ORGANS

These Charts are of value for teaching—Anatomy, Physiology, Sex Hygiene, Gynecology, Obstetrics, and are helpful in explaining the medical and surgical aspects of diseases of the Genito-Urinary Tract.

Hospitals already equipped with Frohse Charts should add this to the set. Price, $14.00.

Sole Canadian Distributors

INGRAM & BELL LIMITED

TORONTO CALGARY

NURSES' and HOSPITAL SURGICAL SUPPLY HOUSE

GERMICIDAL SOAP

A Cleansing Soap and Valuable Antiseptic all in one

¶ Physicians and Nurses use this valuable Soap after being in contact with contagious diseases.

¶ It is also employed by surgeons with splendid results for preparing antiseptic solutions, as it does not corrode their nickel or steel instruments.

¶ It is a pure neutral soap base, to which has been added sufficient Mercuric Iodide to make it a valuable and powerful germicide and an efficient deodorant.

SUPPLIES OF THE SOAP ARE OBTAINABLE FROM DRUGGISTS
WRITE US FOR DESCRIPTIVE LITERATURE

Parke, Davis & Company

WALKERVILLE, ONT.

Montreal Branch:
45 St. Alexander Street,
Read Building.

Winnipeg Depot:
Keewayden Building,
Portage Ave., East.

THE

CANADIAN NURSE

A Monthly Journal for the Nursing Profession in Canada

Editor and Business Manager.....MISS HELEN RANDAL, R.N.

VOL. XVIII. VANCOUVER, B. C., NOVEMBER, 1922 NO. 11

Officers of the Canadian National Association of Trained Nurses, 1922-1924

Honorary President ..... Miss Snively
50 Maitland Street, Toronto, Ontario.

President ..... Miss Jean Browne
410 Sherbourne Street, Toronto, Ontario.

First Vice-President ..... Miss E. I. Johns
Suite G., Frontenac Apts., 2649 Quebec St., Vancouver, B. C.

Second Vice-President ..... Miss K. Mathieson
Riverdale Isolation Hospital, Toronto, Ontario.

Treasurer ..... Miss Jean Wilson
94 Gilmour Street, Ottawa, Ontario.

Secretary ..... Miss Mabel F. Gray
2331 Victoria Avenue, Regina, Sask.

Archivist ..... Miss M. Hersey
Royal Victoria Hospital, Montreal, P.Q.

Councillors: British Columbia—Miss J. F. MacKenzie, Royal Jubilee Hospital, Victoria, B. C.; Miss H. Randal, 125 Vancouver Building, Vancouver, B.C. Alberta—Miss E. McPhedran, Central Alberta Sanatorium, Calgary, Alberta; Miss L. M. Edy, Calgary General Hospital. Saskatchewan—Miss R. Simpson, Department of Education, Regina; Sister Raphael, Moose Jaw, (Providence Hospital). Manitoba—Miss S. Persis Johnson, General Hospital, Brandon, Man.; Miss Isabel Jeffares, Ste. 11, A., Justin Apts., Winnipeg, Man. Ontario—Miss G. Fairley, General Hospital, Hamilton, Ont.; Miss E. MacP. Dickson, Toronto Free Hospital, Weston, Ont. Quebec—Miss S. E. Young, Montreal General Hospital, Montreal, P.Q.; Miss M. Hersey, Royal Victoria Hospital, Montreal, P.Q. New Brunswick—Miss M. Murdoch, G. H. H., St. John, N.B.; Miss A. J. MacMasters, Moncton, N.B. Nova Scotia—Miss C. M. Graham, 1 Duncan Street, Halifax, N.S.; Miss Winnifred Reed, 396 Tower Road, Halifax, N.S. Prince Edward Island—Miss Annie Ross, Prince County Hospital, Summerside, P.E.I.; Miss Bessie B. Beer, P.E.I. Hospital, Charlottetown, P.E.I.

Additional Members of Executive: Chairman, Public Health Section, Miss Florence Emory, 26 Algonquin Avenue, Toronto, Ontario; Chairman, Private Duty Section, Miss Edith Gaskell, 397 Huron Street, Toronto, Ontario.

National Memorial Committee of the C.N.A.T.N.

The regular monthly meeting was held in the Nurses' Residence of the Toronto General Hospital on Tuesday, October 10.

Present: Miss Gunn, presiding; Miss Mathieson, Miss Dickson, Miss Hartley and Miss Russell.

The minutes of the last meeting were read and approved.

The following provincial reports were read:

British Columbia: The report gave plans for a very active campaign in October to complete their objective, including publicity in the newspapers.

Alberta: A report of the August work sent for the September meeting of the National Committee was mislaid, and only came to light after

that meeting was reported. The Alberta nurses promised to start the autumn campaign immediately.

Saskatchewan: This report includes a copy of the letter sent to all members of the Saskatchewan Registered Nurses' Association in September; the letters includes the resolution passed by the S.R.N.A., endorsing the action of the National Association in planning for the nurses' memorial. The report also announced a bazaar to be held by the Regina nurses on November 11th.

Ontario: A copy of the August report, which had failed to reach the Secretary, came with the September report. The latter included a report of the joint meeting of the Ontario and the National Memorial Committees on September 20th. (See report of the meeting in this issue of *The Canadian Nurse.*)

The Ontario Committee states that these plans have been put into effect. Miss Helen G. R. Locke has been added to the Ontario Committee and is now Secretary, Miss Holland remaining as Treasurer.

Quebec: The whole objective has been raised.

Nova Scotia: Report for August and September. Money is now being collected, and plans have been made for a lecture in Halifax by Dr. Mackinnon, Principal of Pine Hill College (and an overseas chaplain). Besides raising funds, this will give publicity to the campaign.

Prince Edward Island: Report showed satisfactory progress from the efforts of a very small group of nurses. (It is innteresting to note that, comparatively speaking, the P. E. I. results are more satisfactory than those of several larger Provinces).

Treasury: The report shows a balance in the bank of $15,107.31. In addition, all Provincial reports indicate an intention to forward funds immediately.

A discussion re the manner of collecting funds brought the following resolution, moved by Miss Dickson, seconded by Miss Hartley:

"It is resolved to ask each Provincial Committee to refrain from making any special appeal to the public or to any associations other than nurses' associations, until such time as a general appeal be made by the nurses of all the Provinces. It is still hoped that no such appeal will be necessary. When any Province has collected all the money that it can get from the nurses themselves, or through their efforts, that Province will not be asked to do more until a report is compiled showing the results for the whole country."

The resolution was passed unanimously.

Consideration was given to a brief report from the Business Committee.

The meeting adjourned.

A special meeting of the National Committee with the Ontario Committee was held on September 20th.

Present: Miss Gunn, presiding; Miss Dickson, Miss Hartley, Miss Cook, Miss Holland, and Miss Russell.

Extracts were read from the minutes of the last meeting of the National Committee, giving reasons for calling this special meeting. The reports from the provinces for August were also read.

All members present felt that active measures would have to be taken immediately in order to raise our objective by the end of the year. The members of the Ontario Committee finally decided upon the following plans:

(1) A report is to be prepared of all contributions which have been received up to date from all training schools and nursing organizations in Ontario. This is to be in tabular form, giving the name of the association, its objective, and the amount so far raised.

(2) A letter is to be sent to all hospitals and organizations that have acknowledged the previous appeals sent by the Ontario Committee. This letter shall enclose the above report.

(3) In the case of alumnæ associations which have not acknowledged any of the previous letters from the Ontario Committee, it was decided to send no further letter to the Secretary, but to write to the present superintendent of the training school concerned, to enclose this report and to ask her to place it in the hands of the president of the alumnæ association of her school.

(4) The Ontario Committee will offer a speaker to any association that wishes to have such for its October meeting.

(5) As soon as a definite answer has been received from Ottawa about the placing of the memorial, publicity will be given to this matter in all the Toronto daily papers simultaneously, hoping thus to reach all interested throughout the Province. This newspaper announcement will give the detail of Ontario's objective and the amount so far raised in each association and hospital in the Province.

(6) The Ontario Committee will offer to hold a personal conference later with any association which does not respond to this appeal.

(7) This report of the amounts raised by each association will be brought up to date at the first of each month and sent to each organization and school contributing.

It was decided that the Secretary of the National Committee should send a copy of these plans made by the Ontario Committee to each Provincial Committee for their information, and, at the same time, ask the Provincial Committees to reciprocate by sending in to the National Secretary any further suggestions that they have to offer.

The meeting adjourned.

E. K. RUSSELL, Secretary.

Government Annuities versus Life Insurance

As one who has invested both in a Government Annuity and in a Life Insurance Policy, I should like to call the attention of the nurses to the good points of both, and also point out how well they work together.

In *old age* there is no investment in the world that will render such large returns as a Government Annuity. But if the money is saved in *any* way it can buy a Government Annuity at any time—preferably, of course, as late in life as possible, as the returns are not large early.

The reason I appreciate my life insurance more than my Government Annuity at my present age is this: I am saving just as surely and yet, if an emergency arises, (and it may be an urgent one), I am at liberty to borrow from my policy. If I die, my favorite sister gets the whole face value of it plus the dividends. As my policy matures at age sixty, I can buy just the same Government Annuity at that time, *if* I have expectation of living and want it.

With regard to my Government Annuity, no matter what financial straits I encounter, no matter how long nor how much I have paid in, I cannot get out a penny. If I die, my sister only gets what I put in at four per cent, and no matter what physical condition I find myself in at date of its maturity, even though I know I may draw but a year or two, I can do nothing about it.

In the case of a young nurse who has been saving in a nice-sized life insurance policy for a few years, and then takes a notion to marry (as nurses have been known to do), she has a nice nest egg for her trousseau, and considerably more, if she choose to take out her cash surrender value and dividends for this purpose.

We older nurses are apt to look at things a bit too much from our own viewpoint and sometimes forget that matrimony does occur among the young and incautious, but, after all, it must be reckoned with.

To my mind the ideal method of saving for a self-supporting woman is to carry as large a life insurance as she can, and when it matures, and if she is old enough and has reasonable expectation of living, she can buy a Government Annuity with it, than which there is no finer combination.

The average nurse should carry at least a four or five thousand, twenty-year endowment, and if, after her third payment, she finds in any year she is not able to carry so much, she can get a bond for any part of it she feels she cannot carry, and let it all go on to maturity together.

S. CAROLINE ROSS.

Sleep is death's youngest brother, and so like him that I never dare trust him without my prayers.

—*Sir T. Browne.*

The Operating Room—Equipment, Care, Supplies

Hospital methods and operating technique are constantly changing. Many institutions have perfected methods giving splendid satisfaction for themselves, that may be entirely unsuited for some other institutions doing a different class of work—managed in another way or situated in diversified surroundings.

Each institution must, to an extent, develop methods for its particular requirements, yet gains much by studying the methods developed in other institutions doing similiar work. The more simple the methods employed the greater the economy in material, in the number of employees, and in time.

The ideal hospital operating room should be on the top story of the institution, with ample floor space and a moderately high ceiling. The operating room should be well ventilated and well lighted. A north light is preferable; artificial lighting should be of electricity on two circuits, the second an emergency switch. Gas should also be installed in case the current is defective. During operations the temperature of the operating room should be from 74° to 76°F.

One essential in keeping the operating room clean is to prevent, as far as possible, the entrance of dust and dirt from outside. In order to effect this, all windows that connect directly or indirectly with the operating room should be screened with fine wire; ventilators intended for the admission of air covered with six thicknesses of second grade gauze and changed twice a week.

The furniture and utensils of the operating room are chiefly of iron, glass and agate. They are necessarily expensive, and the utmost care must be exercised in handling them. They include a suture stand with glass shelves and iron frame, an anæsthetic table, sponge table, long curved table, small table for sterile pitchers, three basin rings, two stools, irrigating pole, irrigator, interstitial pole, and operating table. It is of great convenience to have a small swinging table containing the instruments for each operation, to be placed over the knees of the patient, thereby eliminating the necessity of having some one pass the instruments to the surgeon or his assistant.

The suture stands hold the following:—Sutures of all kinds, solutions that are in constant demand, i.e., tincture of iodine 2½ to 5%; alcohol 90 and 65%, etc.; glass jars containing medicine glasses, catheters, irrigating points, connecting tubes, glass Y's, rubber bands, finger cots, Paul's tubes, colostony rods, douche nozzles, and glass syringes. These are boiled and stored in 2% Formalin (the solution is changed once a week), a set of sterile sponge sticks, a jar containing a few powder puffs, a granite graduate and funnel (sterile and ready for use), a tray containing cotton and gauze bandages, neck rolls (8" wide and 3 yards long, made of second grade gauze), abdominal, breast and T-binders; adhesive, taped and rolled; safety pins, caustic pencil, bismuth

powder, sterile test tubes, tongue blades, iodoform and plain gauze (different widths), and bichloride gauze.

Our operating suite of the Toronto General Hospital is situated on the top floor at the north end of the building. There is a main corridor (inverted "T" shape) into which all the rooms open. On the right, as you enter, the surgeons' wash room is situated. In this we have a chest of drawers and lockers with keys for the surgeons' use, basins with hot and cold water (knee attachments), shower bath and lavatory. Each morning this room is supplied with towels, soap, dry scrubs, caps and masks, which are replenished as the day demands. Following to the right is a general utility room where the maximum of the cleaning is done. The linen cupboard is also here. At the extreme left of the corridor is the Pathological Laboratory, where the quick sections are frozen and examined under microscope by a skilled pathologist. There is an anæsthetic room at each end of the building, opening from the main corridor and connected with each of the two operating rooms. The patient cannot, therefore, come through drafty corridors during the administration of anæsthetic or during the operation. The sterilizing room is between each operating room and easily accessible, being in front of the main door of the operating suite. We have a steam pressure autoclave which accommodates the drums and in which our supplies are sterilized. Here are large tanks of hot and cold water sterilized daily, oftener if necessary. This water is all stone filtered before it is sterilized. Here is also the utensil sterilizer in which the basins are boiled. This is scoured with sapolio every day, rinsed, and refilled with water. The instrument sterilizer is next. It accommodates two instrument trays and is kept *full and boiling* during all operations. An oxygen tank is kept here convenient to both operating rooms, also the interstitial pole. In the main corridor to the left of the sterilizing room door we have a cupboard of sterile supplies in which the interstitial jars, tubing and needles and intravenous outfits are kept.

Patients are brought to the anæsthetic room, placed on the operating table and there anæsthetized (if ether is the anæsthetic administered). All binders, bandages, etc., are loosened, so that when they are brought into the operating room no time is lost in unnecessary moves. If nitrous oxide and oxygen are given, the patient is brought into the operating room and all necessary preparations done before the anæsthetic is started.

There seems to be a prevalent idea that the patient should not be permitted to see the operating theatre at the time of operation, although the great majority of patients express a desire to see it, and are allowed to do so at some time during their stay in the hospital. The modern operating room is attractive and clean, and it can do no harm to let the patient see this for himself. It is certainly more reasonable than to surround the place with such an air of mystery that he is led to believe it such a horrible sight that he cannot be taken there until he is asleep.

The walls of the operating room at the Toronto General Hospital

are washed every day, as high as the nurse can reach, with 2% lysol; the floors are scrubbed daily with hot water and soap, and mopped between operations with lysol solution 1/100. The mop used between operations is kept exclusively for that purpose, and when not in use stands in 2% lysol. All the furniture is dusted daily with a damp duster and all stains caused by disinfectants removed. The water tanks are boiled with soda carbonate 1%, put in hot water and soap, dried, then lubricated with liquid paraffin and gasolene equal parts once a week. To prevent infection being conveyed from the mouth and air passages of one patient to another, the anæsthetist washes his hands before starting any anæsthetic. The ether mask is boiled and fresh gauze (eight thicknesses of second grade gauze) is used to re-cover the mask.

We have a working standard of supplies which is checked every night before the sterilizing nurse goes off duty. Any shortages are listed on the head nurse's desk. A record of sponges and strips in each operation is kept as follows:—Date, surgeon, patient, operation, sponges (large, small), strips (large, small), assisting nurse.

The small sponges are counted into bundles of twelve; large sponges in bundles of six; small and large strips, two in each bundle. These are counted back after use in the same numerical value. Every sponge and strip is accounted for when the peritoneum is being closed and any discrepancy reported to the surgeon. *He takes it for granted that your count is correct if nothing is said.*

If every hospital would keep a strict account of the amount of material used, the amount of linen soiled, and the amount of time of all assistants, nurses and orderlies supplied each surgeon working at the hospital covering a period of six months, the result in most instances would be startling to the surgeons and the hospital authorities. Good technique and efficiency are not measured by the number of assistants and nurses in the operating room any more than is asepsis measured by the quantity of soiled linen.

Economy, however rigidly it is practiced in other departments of the hospital, is often conspicuously absent in the operating room. The hospital authorities are not to blame for this wastefulness. The surgeons and nurses are often wanton in their extravagance. It is not unusual to hear a surgeon talk on this subject while he is at the same time using fifteen inches of the most expensive catgut to ligate a simple small vessel.

In our operating room all sponges, strips, gauze fluffs and face masks (unless after a pus case) are rinsed free of blood, washed in soap and water, and boiled half an hour in water to which soda carbonate and lye (in the proportion of five pounds of soda carbonate to one pound of lye) has been added. Our face masks are used once for face masks, then washed, cut in half and used as fluffs. Absorbant cotton is saved, sterilized and made into wipes.

For plaster cases we find it most convenient to have ready a tray containing silence cloth, flannelette bandages, cotton and gauze bandages, bucks extensions, adhesive, spool of thread with needle, tape measure, absorbent and non-absorbent cotton, stockinette (three widths), pair of old gloves and powder puff, hand towel, plaster cutters and knife, tongue blades, safety pins and two anklets. To be added: shears, bandage scissors, surgeon's gown, talcum powder, a basin with towel and paper in bottom (to prevent plaster settling on the bottom of the basin).

It is a great satisfaction to know that the autoclave is working right; to make sure of this we send a sponge to the laboratory every month for a sterility test.

A book with a brief outline of the technique of the several surgeons who frequently use the operating room, giving a record of size of gloves, needles and sutures preferred, is kept in the operating room, accessible at all times. Instruments for special cases are also listed. In case the nursing personnel changes, this is a great asset. A second book describing in detail the making and sterilization of all supplies is always available and is an invaluable help.

We do not scrub between each operation. When scrubbing, use green soap and brush, scrubbing under running water to the elbows three minutes; rinse, use orange wood stick; scrub with loofah brush and green soap three minutes; rinse, use alcohol wipes. Put on sterile gown (folded inside out with top up) and gloves, in such a way that the outer surface does not come in contact with the surgically clean skin. In taking off, gown first, then gloves, care must be taken not to let your contaminated gloves touch your surgically clean skin. A fresh alcohol wipe is used, sterile gown and gloves put on as before. This saves considerable time, which is a big factor on a busy day.

Where there is a training school, as is the case in our hospital, the work of the pupil nurse should be systematically changed, demonstrations given in draping, "setting up" the operating room, anæsthetic room, and surgeons' wash room, use of the different needles, of the operating table and the different positions required.

There must be an exact place for everything. Everything must be returned to the proper place and every one connected with the operating room know where that place is. When a pupil nurse comes to the operating room her name should be entered in a book, and a complete record kept, showing her class, date of arrival, date due out, length of time detailed to her several duties, and record of her grading.

At the Toronto General Hospital we have a special extra training of two months for under-graduates who show aptitude for surgical work, in which they learn management of an operating room, become familiar with the instruments for any operation, and scrub up for major operations, such as a bowel resection, where a second nurse facilitates and expediates the operation.

Below is an itemized work list we find very useful: The nurse detailed for special training has charge of the instruments for all cases, reports any shortages of instruments. Care of the instrument cupboard, this includes the weekly boiling and lubricating of all hinged instruments. Makes all the normal saline solution, glucose and gum acacia, and helps in the mending of gloves.

The senior nurse is responsible for the work-room, its supplies, and for the orderly's cleaning of sterilizers, boiling the water tanks, testing oxygen tank daily, routine sterilization of all supplies (listing any shortages), keeping instrument sterilizer full and boiling during operations, supply of sterile basins for all cases, "setting up" anæsthetic and surgeons' wash-rooms between cases, keeping saline ready for use, and the weekly cleaning of cupboards and drawers.

The sponge nurses are responsible for the daily dusting of the operating rooms with 2% lysol, reporting to senior nurse supplies used, entering specimens in the book, and seeing that they reach the laboratory; keeping sponge book entered up and signed, and that the standard of supplies in the operating room is complete before going off duty.

The assisting nurses have the care of the anæsthetic and surgeons' wash-room, linen cupboard, laboratory and refrigerator. Daily checking of the equipment in the anæsthetic rooms and testing of the hypodermic syringes, cleaning of instruments and utensil sterilizers, supply of green soap and iodoform gauze, weekly cleaning of medicine cupboard, and assisting at all operations.

We have a probationer who assists the senior nurse with supplies, helps with the weekly cleaning, and goes for the patients when necessary.

In the foregoing remarks I have tried to note in detail the essential requisites for any modern operating room. That these may be given their full value, it is also essential that the organization of the operating room nursing staff should be of high standard, that the nurse in charge, by her personality and good management, should create an atmosphere of enthusiasum and efficient service among her subordinates, and finally that hearty co-operation should exist between the staff and the operating surgeons and the nursing personnel.

ELSIE C. FERGUSON,
Toronto General Hospital.

Read at C.N.A.T.N. Convention, Edmonton, 1922.

It is not enough simply to possess powers; a man may be wonderfully blessed with latent possibilites, but unless he developes them he is not worth much more to himself and to the world than the oyster that lies at the bottom of the bay, waiting for the bit of food that may chance to come along.

Saskatchewan Registered Nurses' Association

The fall meeting of the Saskatchewan Registered Nurses' Association was held in Moose Jaw on Tuesday, October 10, 1922. While the attendance was not large, representatives were present from most of the important centres of the province.

The meeting was presided over by the President, Miss Ruby M. Simpson, who in an interesting address dwelt upon the duty of each member to her Local and to her Provincial Association, as well as to the National Nurses' body. The President also stressed the duties of the nurses to the other organizations with which they are affiliated, if the affiliation were not to be one in name only.

Most interesting reports of the C.N.A.T.N., and C.A.N.E., conventions were presented by the two delegates—Mrs. Feeny and Miss Helen Cameron. The various resolutions passed at the C.N.A.T.N., convention were approved without discussion. In regard to the special levy of fifty cents per member, it was decided that this amount should be paid from the general funds of the Association.

Miss E. M. Turner, Convenor of the Nurse Education Committee, gave a report of the Summer Session for Nurses, held in connection with the Summer School, University of Saskatchewan. Various suggestions and recommendations in regard to the repetition of the course on a more elaborate scale were included in Miss Turner's report. It was decided that the various standing committees—Nurse Education, Public Health and Private Duty—should interest their members, finding out the number available for the course next summer, and that they should make suggestions as to the material of interest to each group. Most hearty resolutions of appreciation were passed to President Murray and the University Senate, to Dean Ling, Director of the Summer School, and to Miss Ethel Johns, Assistant Professor of Nursing, University of British Columbia, and Director of the Course for Nurses at the University of Saskatchewan.

The report of the Memorial Committee was one requiring the careful consideration of the members. The Committee felt that it would be impossible to raise the amount assigned to this province by five dollar contributions. Though some six hundred and fifty nurses have registered in the province, many have moved away, leaving only some three hundred active members—the five thousand dollars required from Saskatchewan could not therefore be raised in this way. The larger local centres reported plans under way for the raising of funds. It was recommended that the province be divided into sections, assigning a given amount to be raised by each district and by each little group of nurses.

A resolution from the W.C.T.U. in regard to the training as nurses of Indian girls who have the proper academic standing, and one from

the Provincial Council of Women regarding a campaign for funds to establish an Industrial School for Girls in the province, were both heartily endorsed.

A telegram of greetings was received from Miss Jeane Browne, President of the C.N.A.T.N., and former President of the Saskatchewan Association. Greetings were sent to Miss Browne, and also to Miss Ruth Hicks, Councillor of the S.R.N.A., who was seriously ill.

The visiting nurses were guests of the Moose Jaw Graduate Nurses' Association for luncheon, while the afternoon session adjourned to the Providence Hospital, where a most interesting demonstration had been prepared, showing standard portions of common articles of diet, and illustrating a well-balanced diet for the child and for the adult. Following the demonstration, the members enjoyed a social half hour at tea, the guests of the Sisters of Providence.

As there would be no meeting of the C.N.A.T.N. until 1924, it was thought unlikely that there would be a Fall meeting of the Provincial Association next year. The place of the next annual meeting having already been chosen—Saskatoon,—it was left to the council to fix the most suitable time for the meeting.

Whate'er thy lot—to work, to wait,
To watch while others sleep,
To sit with empty, idle hands
While others sow and reap;
To fight and win, or fight and lose
In forefront of the fray;
Or, but to gird their armour on
For those who march away:
It matters not, so thou canst feel
At every set of sun,
Whatever task the day has brought
Was well and bravely done.

—Annie Johnson Flint.

What is prayer? This is its simplest definition—the lifting up of the heart to God—with all that is in the heart, joys and sorrows, hopes and fears, sins and doubts and needs.

—Bp. A. C. Hall.

Address at Graduating Exercises Second Attendants' Course

A. K. Haywood, M.D., Superintendent The Y.W.C.A., Montreal General Hospital.

I accepted the invitation to speak to you this evening with certain misgivings—the misgivings that naturally come over one when dealing with an experiment. The "Attendants'" course which you have just completed and which you are graduating from to-night, while not an experiment in the true sense of the word, is an experiment in this city and province.

The trained attendant first made her appearance in Boston under the name of The Household Nursing Association, in 1912, but it was not until 1918 that a definite course of training was established, and since that time several schools for trained attendants have been founded in Canada and the United States.

You are no doubt aware that the course which you have just completed is open to criticism that one finds directed against any new project or innovation that tends to deviate from tradition or long established custom.

It is quite unlikely that these schools for attendants would have been established had there not been a demand for the class of service that you have been trained to render.

This demand is urgent at the present time, and I have no doubt that you will find plenty of opportunities to practise your calling in this city, and it is in view of this probability that I would sound a note of warning.

A knowledge of the needs of this community convinces one that there are scores of families who, when illness overtakes them, will find in your services a blessing. I do not wish to intimate that you will be sufficiently versed in the art of nursing to take the place of the graduate nurse. Her position and knowledge is only made possible after three years of the hardest kind of work, study and sacrifice, and it is only natural that she will view graduation exercises as you have them this evening, with apprehension; but I feel sure that the graduate nurse will realize in time that it is possible for her work to be supplemented by a body of women such as you represent. One cannot help but feel that in many cases of chronic illness—convalescence, and in caring for children, the employment of a graduate nurse would tend to produce such financial embarrassment in that family that would make her employment impossible, nor is it right that on this account some form of service should not be available for this class of patient.

You are not nurses, and my kindest advice to you is to recognize and remember that fact at all times. The nursing profession is an old one and has progressed and perfected itself by many trials and tribulations. They have every just and sufficient reason to be proud and

jealous of their prerogatives, and while it is my sincere wish that you should meet with every success in your limited field, I hasten to warn you to avoid the paths of criticism.

Your course is still in its infancy. I understand that you are the second class to graduate, and to you is entrusted a great deal of the future success of this venture. You can rest assured that you will be watched with a great deal of interest, and there is no doubt that your mistakes and shortcomings will be made capital of to the detriment of this cause.

This course which you have just taken will undergo many changes. I hope I will not be misjudged if I venture a few suggestions as to these changes that at the present time might be profitably adopted. I cannot help but feel that your usefulness would be materially increased had it been possible for you to have supplemented your theoretical work with practical work in institutions that lend themselves to your particular class of work. By that I mean institutions for incurables—convalescents—certain classes of children's hospitals, or even small general hospitals without training schools, or in which there is difficulty in securing probationers. The question is bound to be asked why not general hospitals with training schools? The answer is that experience has proven, in those hospitals that have combined the attendants' course with the nurses' course, that it has not been successful. The attendant has had relegated to her the most menial duties of the wards without the interesting nursing care to make this drudgery bearable. There is inevitable jealously and friction between the two classes of pupils.

Your future as attendants and your proper employment is largely in the hands of physicians, and I sincerely trust that the physicians that employ you will insist on continued supervision of your work, and by that supervision you will avoid the pitfalls that await you which, if not avoided, will bring your entire organization into disrepute.

To those who have been instrumental in enabling you to take this course, great credit is due. The Y.W.C.A., in fostering this work, has done the community a real service. Whether you young ladies have undertaken this work as a means of livelihood or to better fit yourselves for your home duties in case of illness matters not when one realzes the lack of knowledge of the first principles of home nursing so prevalent in the young woman to-day. One cannot but feel sorry for the young wife of to-day at her apparent confusion and consternation when asked by her physician if she has taken a temperature, or can she make a poultice, or her lack of knowledge of the first principles of hygiene.

I am sure that those who are fostering this cause have no intention, in giving recognition to the trained attendant, to provide a poorly trained nurse for the poor or middle class, and my last word of warning is to prepare now for legislation that will make it just as impossile for an unscrupulous attendant to practice as a nurse, as it is now impossible for a nurse to practice as a physician.

The community needs your services badly, and I hope that your course will be broadened and developed with a sincere view to a large community service. Our hospitals are now overcrowded, and we are told that only 10% of the sick of the community are in hospital, so you can see what a broad field is open to you.

In closing I would like to quote from an article that I came across in a recent number of the *British Journal of Nursing*: "We fear that the short-term training of nurse attendants in Canada and the United States who are "registered" is going to undercut standards and fees for genuine professional nurses. When the arrangement was agreed, we felt sure that the profession was trifling with its economic stability. We note from our press cuttings from abroad that these "attendants" have assumed the complete white uniform of the professional nurse. The Y.W.C.A. is responsible for turning out these graduates in Montreal, but we are told their training is not considered complete until they have been in attendance upon a certain number of patients. Let us hope such patients are not charged for trained services".

I read this quotation without passing any further comment. It senses certain fears of the nursing profession, but I am convinced that your organization is aware of these fears and will avoid them, and by so doing will command the respect and assistance of all who have the interest of the community at heart.

NOTABLE OPINIONS

Some men are in a state of perpetual confusion. They are always apparently as busy as bees, but they never achieve anything. It is no use working unless there is a settled plan. The day's activities should be carefully schemed—so many hours for work, so many for study, so many for healthy recreation.—*Sir H. Woodman Burbridge.*

As soon as a thing begins to influence public life, you find a few people trying to control it. But the history of any great movement shows that finally it is the great public in the end that will control.—*Lady Astor, M.P.*

Love thyself last,—Cherish the hearts that hate thee,—Be Just and fear not.—Let all the ends thou aimest at be thy country's, thy God's, and truth's; then if thou fallest thou fallest a blessed martyr.—*Shakespeare.*

Guard well thy thoughts, for thoughts are heard in heaven.
—*G. Herbert.*

A Moral Prescription

(Continued from last month.)

Chapter III.

In the world's rotunda of sorrow or poverty, there are those who, losing courage, shrink into the shadows and bitterly try to unravel their existence unseen and alone; while others, dauntlessly grasping the hand of a mighty unseen power, ride above all seeming difficulties and enter triumphant into a world of action, ready to work hand in hand with those who are steadily fighting for the uplift of humanity. Of two such types were Kate Doran and Barbara McLean.

Truely and surely both sorrow and deprivation had entered the happy life of the young widow, and just as truly had she unconsciously shrunk into the shadow of distrust and bitterness. Her hospital training was merely an end to a means of livelihood. Life for her ended at that point.

On the other hand, Barabara McLean had in her the keynote of optimism that saw good in all things. Though coming of high-born Scotch parentage, she was left on her own resources while in the adolescent age; but there was handed down to her a heritage far exceeding the value of gold—a firm belief in the individual guiding hand of an all-wise and loving God. With that heritage she trampled her difficulties under foot and made her way into a world made bright and beautiful by the sunlight of service.

The very fact that Kate Doran needed sympathy and love, qualified her for a place in the affections of Barbara McLean, and the passing weeks saw a friendship formed and sealed with a bond of understanding of each other's sorrows which the other students could not grasp. Gradually the disinterested expression left the face of the young widow, and a bit of the reflection of Barbara's brightness took its place. Then, too, wayward curls had a fashion of creeping from underneath the linen cap, 'til Dot Lee was forced to admit that Kate Doran was getting better looking every day.

And the weeks slipped by until June came in all its radiant freshness, and brought with it a Sabbath day lovely in its verdent garb of nature. The hospital windows swung wide open. Patients propped in their cots eagerly breathed in the exhilarating atmosphere and drank in the beauty of the valley where the village nestled in cosy protection.

Mark Clayton glanced at his wrist watch. It was 10:45 a.m. Yes, they were about to start: and they did— those bells! Soft and silvery, clear and confident, bringing a message of hope to the suffering ones. Mark had learned to love those bells, and as he closed his eyes, his heart beat strangely. He would listen to those bells three times more, and then he would be free! Free to leave the hospital where for five long months he had fought for the restoration of a crushed limb, the result of a

negligent auto driver. With the feeling of joy, one of regret passed over him. After all, there would be many things he would miss. There were the bells: they could never sound the same under any other circumstance. Then there was the old padre who would soon be coming with his guitar. Dear old Padre Jewell! How they all loved him from the crown of his shaggy head to the soles of his highly polished Sunday boots. Then there was the little red-headed nurse who had helped him fight from the very first hour of his appearance in the hospital through the many critical days. He wondered, as he had often done before, who she was and what was her history. Again he lived through the night when, restless with pain, he had leaned half way out of his cot, and, peering around the door, amused himself watching the reflection in the door of the nursery around the bend in the hall-way, and heard the suppressed voices of the nurses over the dead child. What did it mean? Who was she? What was her history? He was certain nurse McLean could tell him: but would she? After all it was none of his business, and yet he felt that when once he was free to play a man's part, he would find out for himself.

"I say, Clayton," came a voice from the next cot, "wake up! Can't you hear who's coming?"

"The padre, isn't it?"

And sure enough the padre's face beamed through the doorway, while his faded frock coat took on a greener and shinier aspect than ever before.

"I say, Padre," went on the first speaker, "tune up quick, eh? There's a man from this ward down in the operating room, and they're liable to shoot him up here any minute, and that will mean good-bye to our song service."

"All right, boy, what shall we have?"

"A morning like this makes one feel like the Glory Song!"

In quick obedience the chords were struck, and the inmates of the five beds joined the padre in the chorus of the chosen hymn. They had but finished, however, when the 'operating procession', as the boys termed it, arrived—the kindly old house doctor, Nurse Doran, and two orderlies bearing the stretcher.

"O I say, Doc., have a heart!" came a disappointed voice from cot No. 1. "No fair to spoil our concert this way."

"Sorry fellows, but it can't be helped. However, I guess the padre's voice won't disturb this chap if the rest of you will have sense enough to stop bellowing." And so saying he took a last look at the patient and retired, leaving Nurse Doran in charge.

Presently stillness reigned as the padre very softly touched the strings of his instrument; then, in a voice soft and sweet as a woman's, started to sing. His was the soul song that irradiated the rugged features till the hearers forgot the human and saw in him the divine.

What a picture it made that glorious June morning! How indellibly it was imprinted on Mark Clayton's life memory! What appreciative listeners. There was Jim Black in the bed opposite, his big bloated face overspread with a satisfied smatter. Clarke, to his left, had his head bandaged so that only his face could be seen, but there were two big tears rolling down his cheeks. Then there was the handsome face of the new-comer lying death-like under the influence of the ether; lucky dog, though, to have Nurse Doran's white finger-tips pressed on his pulse. How pretty her hair looked with the sun shining on it.

Softly the padre sung on, blending one hymn into another:

"Yes, He understands, all His ways are best:
Now, He calls to you, come to Me and rest.
Leave the unknown future in the Master's hands:
Whether sad or joyful, Jesus understands."

Clayton noticed Nurse Doran's blue eyes fill with tears, then her head quickly turned as she busied herself swabbing the mouth of her patient. And Mark Clayton wondered again what the future was holding in store for the little woman, and what it held for him; and, strangely, the padre's message brought peace and a feeling of certainty that all would be well under the guidance of the wonderful Power of which he sang.

Chapter IV.

But all hospital days are not glorious June days. There are times when dull, rainy weather casts a depression over all. For days, late October had been weeping sadly over the passing out of summer. A few bedraggled leaves hung from their sodden branches tremulously fearing the same fate as their beautiful sisters gone before. A fog shrouded the landscape, the town below being only recognizable by a deeper, smokier fog through which the buildings appeared like awesome spectres.

Barbara McLean entered the public ward bearing a tray on which were various treatment accessories, and smiled kindly as she laid the tray by the bed-side of a pale-faced woman. A gloomy morning always had a tendency to make Barbara's grey eyes of a deeper hue, until they sparkled under the long eyelashes; the curled lips were just a bit more expressive, while the strong, determined chin took on a firmer attitude as if in defiance to the weather fates.

"O I'm so glad YOU are to give me the treatment this morning, nurse. Somehow it seems more than I can bear at times to have some of the nurses come near me." But despite the tender touch of the beloved nurse, the sick woman cried out in pain.

Suddenly a big wholesome, kindly face looked out from under the covers of the next bed which had just received its occupant the previous evening.

"Sure now and I have been aggravated about you, sure enough; and I couldn't be sleepin' in the night lookin' at the wan face of you. Now don't you be cryin' and spoilin' all your good looks—"

"O, Mrs. Flynn, I haven't any good looks to lose," sobbed the suffering woman.

"I know, I know, but don't you be cryin' anyway—there's a good child, now."

And as Nurse McLean deftly adjusted the bandages and bestowed a kiss on the white forehead, the little woman lay quiet and still once more.

"Sure now, nurse," came the kindly voice again. "You're an angel of mercy in very deed, to go quietin' a sufferin' child like that. And now, if you would be good enough, would you kindly be propin' me up a bit so that I can put a few more stitches on my good man's socks. Just 'cause the weather's dull doesn't say we should be foldin' our wings and sulkin' like a lost crow."

To Barbara, the kind Irish face was like a ray of sunshine, and while arranging her pillows she encouraged her to chatter on at will.

"Will you be to tellin' me, nurse, who that pretty little lady is yonder in the end bed? Sure, now, and if she doesn't put me in mind of a doctor's wife I once knowed. Alike as two beans!" Mrs. Flynn chuckled, then went on in a hoarse whisper. "You know, maam, the doctor's wife was very proud of herself, she was. She would say to me, she would, 'you know, Mrs. Flynn, my husband thinks I'm fit to be a princess'; and as I used to say to her, och, now madam, and don't you go to be believin' everything your husband tells you. You know, nurse, husbands are all very good, but you can't be believin' even the best of them."

Thus it was that Barbara left the ward with a hearty laugh. As she did so, she almost ran into Nurse Doran, who faced her quizzically.

"What's the secret, Barbara? The gloomiest weather never seems to influence your temper in the least."

"No secret at all, Kate; all you need to do is to run in and see Mrs. Flynn. She would dispel the darkest gloom."

Kate wheeled around: "I'm going to help you sterilize those instruments, Barbara; I want to talk with you."

"All right, Kitty my dear, you may."

"It's this way, Barbara," continued Kate, "Mark Clayton phoned a while ago wanting me to accompany him to dinner to-night, and I'm not going."

"And why?"

"Well, in the first place, everything I own is out of date. My suit looks seedy; my Sunday-go-to-meeting dress needs re-making; my gloves and veil are yellow from the summer's wash; I haven't resurrected my last winter's hat as yet,—I don't know what it will be like."

"I've got it!" cried Barbara, enthusiastically. One of the junior nurses was telling me of a young woman who has just started dressmaking and she will make over your dress very reasonable. As for your

gloves and veil, I have a package of navy blue dye which will make a marvelous transformation."

"But that doesn't help me out for to-night," interrupted Kate, "and anyway, I'm not going to his home again. It doesn't look right to be going there too often. I believe his dear mother pities me."

"Pity nothing, Kate, can't you see that Mr. Clayton likes you?"

"I don't know, Barbara, whether he does or not; all I do know is that it is miserable not to have a home or friends to escape to where one can entertain once in a while." And Barbara's heart was touched as she saw the tears fill the bright blue eyes.

"I know what to do, Kate," proposed Barbara, "invite Mr. Clayton here this evening, and entertain him in the reception room—."

"Yes," added Kate impatiently, "and sit like two statues at ease while all the other nurses file past, take a look on the side, and make comments later."

"Now wait till I finish, Kate. You know the Supers have a business meeting to-night in the town hall for to consider improvement propaganda. Then, Dot Lee with most of the senior nurses are off to a theatre party, while all the junior nurses are having a tea-party. The rest will be off to their old haunts. Could anything be more convenient than that?" And Barbara, placing the last article in the cupboard, closed the door with a bang

"Now," she advised, as a buzzer was heard in the hall, "skip along and answer that call, and don't worry your fuzzy head any more about it."

Barbara was so busy that she almost forgot the evening plans, till later in the day she ran across Dot Lee.

"Don't forget, Barbara, we're all to be away from here by a quarter to eight, sharp. They say the play is wonderful."

"Sorry, Dot, but I'm afraid I can't go to-night, after all—."

"Hm! interrupted Dot with knitted brows. "I suppose Mistress Doran is going to take you out with her friend to-night? It seems to me you're most terribly captivated with the little sphinx! However, we don't want to force you into our company, you know."

"Barbara's face flushed with anger. "I was going to tell you, Dot, why I could not go; but seeing you seem to know all about it, I hardly need to explain."

So saying, she sent an annoyed Dot on her way, and Barbara continued her work, glad at heart that she did not have to explain exactly what her evening plans were—in fact, she hardly knew herself, until she faced Belle DeLaCour in their room that evening.

"Say, Barbara, is it true you're not coming this evening?"

"Yes, my dear, and listen while I tell you." Then she poured into the sympathetic ears of Belle just what she wanted to do, and large-hearted Belle understood and freely forgave her for disappointing them.

By eight o'clock the banging of doors and hurried tread through the nurses' apartments ceased, and Barbara, on her knees in front of her trunk, resurrected a tray, a spirit lamp, a tiny brass kettle, and three hand-painted cups and saucers. "My little light-house-keeping necessities haven't come amiss after all," she thought, as she laid them on the dresser and covered them with a tray cloth. Then, getting her ulster and hat, she made her way to Kate's room, where that lady was donning a skirt and shirt waist.

"Kate, you're not going to wear that regalia to-night, are you?"

"Why not?"

"Why not! Why Kate, what's the use of wearing those things before you have to? Where's your pale blue voile dress? Summer's not over yet, and anyway you're not going out."

"I really never thought of it," laughed Kate. I wonder if I have time—"

"Certainly. I'll help you."

Quickly the transformation was made, and Kate with flushed face stood ready to answer the ring to the bell. "By the way, Barbara," she questioned, "I thought you were going with the girls to-night?"

"No. I decided not to go. I'm going to run down street for a little while, and then I'm coming back to study."

"You're coming back to do no such thing. You're coming back to help me entertain," decided Kate. Then, with a quaint curtesy, she added, "this is my evening at home—that is if no one else decided to thrust their presence on my unwilling hospitality."

"All right, Kate, only too glad of the pleasure. I'll be back presently."

Taking a short cut across the hospital campus, Barbara espied Henry in the act of chatting with an ambulance driver. She accosted him. "Good evening, Henry! I wonder if you would do something for me?"

"Why hits you, Miss McLean. I 'ardly knew you."

"It is this, Henry. Would it be possible to have the grate in the living-room lit this evening? You know it had not been started yet this season."

"Why of course, of course. I'll send 'Arry along this minute."

And when Barbara returned at nine o'clock, Mrs. Doran and Mark Clayton were seated cosily in front of a crackling grate fire.

The fates could not have arranged it better. Perhaps she should not be going against rules, but all the juniors were out, and there was no one to whom they could set a bad example. Hastily she arranged the refreshments and proceeded to the living-room.

"Barbara!" exclaimed Kate, breathlessly. But a warning look silenced her, and the three partook of the dainties amid mirth and repartee. Then carefully gathering up every semblance of the feast, Barbara bade Mr. Clayton good-night.

Later, when Kate peeped into Barbara's room, she found her engrossed in a book. "Barbara, how can I ever repay you? I hope it won't mean trouble."

Barbara met her query with a chuckle. "The best way to repay me is to get that dress over to the dressmaker's before next week's invitation comes. To-morrow we can do the dyeing stunt at hours off."

Numberless footsteps announced the arrival of the first squad, and Kate, kissing Barbara good-night, carefully tucked her in bed and put out the light.

"God bless you," she whispered; then vanished to her own room.

(*To be continued.*)

The theory of the 19th century that the best industrial system was one founded entirely on human selfishness has resulted in the bitter consequences from which we are suffering to-day. Usually false is the notion that man is by nature filled with the spirit of self-sacrifice and is prevented only by a pernicious system from emptying himself to his fellows. The truth lies between these two extremes. Our aim should be not the "economic" and "psychological" man of the past and present, but the "social" man of the future, master of all his instincts and ruling his actions in the light of reason and justice. No good purpose can be served by pretending that this happy state of affairs is present, but, by endeavouring to develop the higher motive of service, we shall be appreciably nearer that object.

—*Arnold Rowntree.*

HAPPINESS

It is almost entirely the individual's fault if he is not happy, for happiness is a cast of mind. One of the greatest of all poets says, "There is nothing either good or bad"—in this world—"but thinking makes it so." Happiness resides not in the pocket nor even in the bodily health, but in our mental attitude to our surroundings, and in contentment with our lot. We cannot entirely govern our surroundings, but each of us is captain of his own soul. Thank God for what you have got.—*Sir Alfred Fripp.*

Lectures on The History of Nursing

WITH DESCRIPTIVE LIST OF LANTERN-SLIDES

By MAUDE E. SEYMOUR ABBOTT, B.A., M.D.,
Curator of the Medical Museum, McGill University

LECTURE XI.

(Continued from last month.)

Origin of the American Red Cross

As already stated, the United States, although informally represented at the Geneva Convention by the presence of both the American Minister to Switzerland and the European agent of the United States Sanitary Commission, took no official action in the matter until eighteen years later (August 22nd, 1882), and for thirteen years longer, that is, until 1905, the Society remained without definite membership or organization (Boardman). The causes for this delay in the inauguration of the movement, which in the United States has made, in later years, phenominal strides in nation-wide organization and the distribution of national relief, are no doubt to be traced, in part at least, to the fact that the date of the Geneva Convention synchronized with the height of the Civil War, when the American nation was itself plunged into an extremity in which it had no room for external affairs, and when, moreóver, it had been driven by its own distressing necessities to the organization of a Sanitary Commission which was excellently adapted to meet the urgent requirements of the situation, and which had evolved (with the assistance of Miss Nightingale, whose advice was sought and followed), a splendid code of regulations that placed the military hygiene of the American Army in advance. The negative attitude of the American Government in the early years of the Treaty was probably due in part at least to the paralysis of national effort that follows inevitably in the wake of war. During the years immediately succeeding the Geneva Convention the most strenuous efforts made by the members of the Sanitary Committee and by others, chief among whom is to be mentioned Miss Clara Barton, to obtain the adoption of the Treaty, were without avail. In the year 1881, the copy of a letter urging the adoption of the Geneva Treaty, which had been written in the year 1877 by M. Moynier on behalf of the International Committee to the President of the United States and forwarded through Miss Barton, but which had remained shelved through the four years succeeding, was presented to President Garfield by her and received most favourable consideration. A reply was accordingly addressed to Miss Barton, asking her to inform M. Moynier that his letter would receive every attention and that the matter would be brought before Congress, and that "should the President, as I doubt not he will,

approve of the matter, the administration will recommend to Congress the adoption of the International Treaty which you desire." Shortly after this time, President Garfield was assassinated. Among the first acts of his successor, President Arthur, were the proceedings leading to the adoption of the Treaty, which was signed by him on March 1st, 1882.

Already, in May, 1881, as soon as the favorable reply to Mr. Moynier's letter had been received, a Red Cross Committeee had been appointed under the name "The American National Association of the Red Cross" (incorporated in July, 1881), under the honorary headship of the President of the United States and with Miss Clara Barton as its President, and a Constitution was drawn up in readiness for operation immediately upon the adoption of the Treaty. A feature of the constitution was the definite statement which it contained that relief in disaster in peace as well as in war was an essential part of the field of action and programme of the American Red Cross. This wise provision, which had already been carried out by the Russian Red Cross, may well have been the result of Miss Barton's personal knowledge of the discussions that had taken place upon this point at the early Geneva Conferences and of the broad view taken of it by the chief promoters of the Treaty, Mm. Moynier and Dunant.

Initial action was taken under the provision within the year, a few weeks after the formation of the first local branch in the United States, which occurred at Dansville, N.Y., Miss Barton's home, on August 22nd, 1881. A few weeks later the great Michigan forest fires swept through the adjacent country, and the infant organization rose to its opportunity, calling two other branches into existence in the vicinity of Rochester and Saratoga, N.Y. From this focus the work quickly spread, in a semi-organized state, and usually as auxiliary to a larger Government system of relief, but centred around the heroic figures of Miss Barton and her little band of associates, who in person administered and distributed on the scene of the disaster the funds and supplies for which they had personally appealed. The activities of the next fifteen years read like a romance of personal biography. But relief that was carried on in continuous succession during those years through the exigencies of the Ohio River and Johnstown floods (1884 and 1889); the Texas famine (1886); the Florida yellow fever epidemic (1888); the Russian famine (1891-92); the South Carolina Islands hurricane (1893); and last but not least the Armenian massacres (1895), form the first pregnant chapter in the achievements of the American Society. The instant assistance rushed to the scene of the Halifax disaster, and the efficient action taken against famine and plague in the far East are illustrations of the same activities developed along more highly organized lines to-day. Ever since those early days this function to help in national and international disaster has remained one of prime importance in the work of the American Red Cross, and there is no doubt but that the experience gained in it has been of material assistance in developing the details

of the Public Health Campaign of the League of Red Cross Societies in which the idea of national relief is extended to include the prevention as well as amelioration of disease. In this new departure into the field of public health the International Committee of the Red Cross itself led the van a number of years ago, as is related above.

The outbreak of the Spanish-American war in 1898 and the necessity it brought for war relief measures on a large scale carried the subject of the Red Cross into the foreground in the United States, and reorganization on a broader and more official basis was felt to be necessary in that country. After several minor changes a strong committee was formed, Miss Barton resigned the Presidency, and a new corporation was created, on July 5th, 1905, with the form of government as it exists to-day. The American Red Cross is now controlled by a Central Committee, of which the President of the United States is Chairman, and upon which are seated the Chairman and Vice-Chairman of the three administrative boards under which it is administered, namely, War, National and International Relief. In the first of these offices, that of war, the Surgeon Generals of the United States Army and Navy are Chairman and Vice-Chairman. The country itself is organized under a Central Committee on a system of state boards made up of local branches or chapters.

For details of the activities of the American Red Cross, both before and during the war, students are referred to the new authentic history of that subject in two volumes now in course of preparation by Miss Lavinia Dock and Miss Elizabeth Pickett. Publication is expected next spring.

Slide 270. Clara Barton. One of the heroines of the American Civil War and an active agent in the formation of the American Red Cross; frequently spoken of as its founder. Through the fact of her residence in Geneva at the outbreak of the Franco-Prussian War and activities throughout that campaign, she became the intermediary through whom M. Moynier's letter on behalf of the International Committee was finally presented to President Garfield, a step which directly led to the adoption of the Treaty. Born at Oxford, Mass., the youngest child of a thrifty New England family. Began teaching school at the age of fifteen and organized the first Public School in New Jersey. In 1855 she received an appointment at the Patent Office in Washington and was in occupation of this post at the outbreak of the Civil War in 1861. Immediately she went to the assistance of the wounded and later was permitted to follow the army, and rendered great assistance in the terrible emergencies that prevailed from 1861 to 1864. In 1865 she instituted a search for news of missing men and the location of their bodies, and was later reimbursed by Congress to the amount of $15,000 for expenditures so incurred. In 1869, on the successful completion of this immense undertaking, she went to Geneva, Switzerland, for the winter, for the recovery of her health. On the outbreak of war (July 15th, 1870) she was immediately invited by the International Committee to accompany the Red Cross to the Franco-Prussian front. In spite of ill-health she accepted. The tribute she paid to the splendid efficieniy of the International Red Cross in action there has become historic. "Within three days, before

a shot had been fired, it was on its way with its skilled agents, ready to receive, direct and dispense the charities and accumulations which the generous sympathy of twenty-two nations might place at its disposal." After the capture of Strassberg she established workrooms there for the employment of poor women and the assistance of the unclothed, and laboured with them for three years. She returned to America in October, 1873, and as soon as her health permitted she began a propaganda to establish the American Red Cross, which resulted successfully, as related, in 1881-82. Died April 12th, 1912, aged 87.

Slide 271. Clara Barton, in her workrooms at Strassberg after the siege of that city.

Slide 272. Autograph Endorsement by President Garfield of the request presented by Miss Barton for an interview with Secretary Blaine to present M. Moynier's letter on behalf of the International Committee of the Red Cross prior to the adoption of the Treaty. It reads:

"Executive Mansion,
Washington

"Will the Secretary of State please hear Miss Barton on the subject herein referred to?

(Signed) G. A. GARFIELD.

Mch. 30, 1881."

Slide 273. Red Cross Decorations presented to Clara Barton; (a) Iron Cross of Merit by Emperor of Germany, (b) Geneva Medal of Honour by International Committee for securing the adhesion of the United States to the Treaty, (c) Servian Red Cross by Queen Natali of Servia.

Slide 274. Scene of devastation after the Johnstown Flood, May 30th, 1889, where Miss Barton and the American Red Cross Association assisted in relief.

Slide 275. Armenian and Turkish decorations conferred upon Miss Barton in the Armenian Relief Expedition by the Armenians and the Turkish Government.

Slide 276. Relief Expedition of the American Red Cross to Manchuria, led by Dr. R. P. Strong, against the Pneumonic Plague in 1908. Shows physicians robed like the Misericordi Brothers to escape contagion. Their mouths are protected behind the mask by three inches of cotton wadding.

Slide 277. Scene of devastation in the Halifax Disaster, 1915, in which the American Red Cross rendered such prompt and signal service.

(Reference is made to volunteeer work done under the auspices of the American Red Cross during the recent Great War, under the title "American Volunteer Help" in Lecture X., and after the account of the Canadian Red Cross at the end of this section).

The Canadian Red Cross.

Origin and Development: This society was founded in 1896 by the sagacious action of Colonel (now Major-General) G. S. Ryerson, with the consent and approval of the British "National Society for Aid to the Sick and Wounded in War" (the forerunner of the British Red Cross Society), by Letter of Authority dated at London, December 2nd, 1896. It had the honour of being the first Colonial Branch organized in the British Empire. It was incorporated by Act of Parliament of the Dominion of Canada in 1909 as a National Society, its charter reading

"to furnish volunteer aid to the sick and wounded in time of war (in accordance with the spirit and conditions of the Conference of Geneva of October, 1863, and also of the Treaty of the Red Cross or Treaty of Geneva of August 22nd, 1864), and to perform all the duties devolved upon a national society by each nation according to the Treaty, but in affiliation with the British Red Cross Society." It is organized under a Central Committee elected from its members, in Provincial Branches whose special duty it is to organize self-supporting local branches throughout the Dominion. In accordance with an essential principle of Red Cross organization, its functions are strictly auxiliary to the Canadian (and through it to the British) government. Contrary to the usual Red Cross rule of having headquarters at the seat of government or its vicinity, the Canadian Red Cross headquarters are at Toronto.

Activities in War: The first opportunity for the exercise of its forces in time of war came to the Canadian society in the South African campaign (1899-1902), and the first call upon the people of Canada for subscriptions for this purpose was sent out by it on October 5th, 1899. The collection of money and supplies in Canada was under the direction of the late General James Mason and Colonel C. A. Hodgetts, Hon.-Sec., the latter of whom was made an Honorary Associate of the Order of St. John of Jerusalem in England for services rendered in this connection. The Society sent General G. S. Ryerson, M.D., as Commissioner to South Africa, and upon his return to Canada he was succeeded by the late Colonel G. Lyons Biggar. During the next three years contributions to the value of $50,000 in cash and in kind were received, and a number of local branches were organized.

(To Be Continued)

The world to-day is suffering grightfully from the absence of a high standard of international morality. If high standards of morality had determined the relations of nations and the duties of monarchies and statesmen in former years, we can well imagine what would have been the resultant blessings contrasted with the horrible losses which the world is now enduring. War, the greatest enemy of mankind, cannot be abolished and destroyed until a more wholesome and far higher standard of international morality determines relations between country and country.

—*Rt. Hon. J. R. Clynes, M.P.*

Love all, trust a few, do wrong to none.

Editorial

In the October issue the readers of this magazine were advised to use The Report of the Committee on Nursing Education, made by Miss Josephine Goldmark, under the direction of the Rockefeller Foundation, as the basis for a part, at least, of their winter's work in the various nursing organizations. A printed copy of this report may be secured from the office of the National League of Nursing Education, 370 Seventh Avenue, New York City, N.Y. Price, 15 cents per copy.

* * * *

Now that every province in Canada has registration laws of various degrees of value to the nurse and the community, much stress might and should be laid on the value to the individual nurse in being able to place the letters showing her registration after her name on all occasions where her professional status is used or referred to. Each provincial organization should use every means at its disposal to persuade hospitals, organizations employing nurses, and specially the nurses' registries owned by the nurses, to insist on the applicants for positions or work having this qualification. It is of very little use if the nurses themselves do not insist on its being an absolute requirement of any nurse wishing to be placed on the registry. This matter should, of course, have been attended to when the waivers were in force in each province, but, since this is not the case, perhaps a similar waiver might be made in the regulations of these registries. That is, it might be ruled that any nurse who graduated previous to a certain date might at any time become a member and beneficiary of this registry, but that nurses graduating after that date must have the qualification of R.N. either by examination or through reciprocity with other provinces and countries. Where a nurse, a recent graduate, wishes work between examinations or some such similar case, a permit might be made out by the officers of the organization controlling the register, and she be allowed on till such time as the next examination takes place.

It is rather a farce to have a registration law on the books and no attempt made to make it compulsory where nurses themselves own registries. Each superintendent, too, should feel it her duty to make this question the first, on meeting an applicant, and it will soon come to be recognized that registration is a real asset and not simply an ornament to a few of our nurses.

It is a truism, but one often practically forgotten, that there is no medium between truth and falsehood.

—*Archbishop Whateley.*

Public Health Nursing Department

OFFICERS:

Chairman—Miss Florence Emory, 26 Algonquin Avenue, Toronto, Ont.
Vice-Chairman—Mrs. Hannington, 104 Sparks Street, Room 4, Ottawa, Ont.
Secretary—Miss Muriel Mackay, 190 University Avenue, Toronto, Ont.

Address public health news items from each province to the following representatives:

Nova Scotia
Miss Margaret McKenzie,
Department of Public Health,
Halifax.

New Brunswick
Miss Sarah Brophy,
74 Carmarthen Street,
St. John, N.B.

Quebec
Miss Lawrence,
207 St. Catherine St. West,
Montreal, Quebec.

Ontario
Miss Muriel Mackay,
190 University Avenue,
Toronto.

Manitoba
Miss Elsie J. Wilson,
798 Grosvenor Avenue,
Winnipeg, Manitoba.

Saskatchewan
Miss Nora Armstrong,
City Health Department,
Regina, Sask.

Alberta
Miss Elizabeth Clark,
Prov. Public Health Dept.,
Edmonton.

British Columbia
Miss M. A. McLellan,
1883 Third Avenue, West,
Vancouver, B.C

The Development of the Public Health Nursing Department of the "Canadian Nurse"

Read at the Public Health Section of the C.N.A.T.N., Edmonton, June, 1922.

That "a prophet hath no honour in his own country" we have all been led to believe. How, then, is it that the writer, having through various circumstances spent most of her nursing years outside her own country, never having been asked either to read or write a paper, comes home to be called upon on the very first public occasion? Open confession being good for the soul, neither has she ever, in all her life, attended a nurses' convention, and her acquaintance with the *Canadian Nurse* dates back just over one year. It should seem either that our neighbours are unobservant or unappreciative of those within their gates (qualities not often attributed to them) or else that Canadians, being easily imposed upon, are eager to grasp any raw material available, regardless of consequences. However that may be, please realize this subject is approached very humbly, and be a little indulgent if, through ignorance, there is deviation from the truth, or repetition of what has already been said innumerable times in a much more forceful way.

Of necessity, no doubt, the space allotted to the Public Health Nursing Department in the magazine is limited. Therefore most of us will agree with a nurse who wrote recently regarding this subject, "I think that as such wonderful things are being done in Public Health lines all over our own, and in every country, the little space we have should be used just as carefully as possible, and only worthwhile things published".

The question is, "What will appeal or be of service to the greatest number, as, what meets the wants of one may fall far short of the demands of another"—and there is no denying the fact we are a miscellaneous mixture. Think for a moment of the wide territory over which the *Canadian Nurse* travels, and the variety of positions occupied by its subscribers in all parts of the country. Continuously increasing numbers of these are engaged in doing Public Health work of various types, under different auspices in small cities or towns, not to mention rural districts, far removed from the few large centers. Frequently these nurses lack opportunities locally of obtaining current literature or publications pertaining to their work, or of meeting others of their kind and discussing mutual problems. To these particularly does not the *Canadian Nurse*, our national professional magazine, essay to be "the Light in the Window?" If it, then, or our Department, falls short of our ideal, who is to blame? Undoubtedly not the Editor or Chairman—that is, if they have not had behind them the interest and support of every individual nurse, as well as of the provincial representatives, to insure prompt reporting of interesting local or provincial happenings.

Then, too, what a help it would be if each individual nurse could realize that Public Health work as such is still in its infancy, and that an account of any little experience or accomplishment of hers is bound to be of interest to some poor struggling soul away in another corner of the country, possibly needing just that inspiration to encourage her to persevere in what previously seemed a rather hopeless task.

Contributions from members of the larger city staffs would not be despised. Halifax, with the Massachusetts-Halifax Health Commission and other local activities, has done great things, and must have much to say. Vancouver, as usual well in the lead, could help us surely. Winnipeg might induce Miss Pritchard to write an article on "Mothers' Classes" as a beginning. Edmonton could tell us of these "incomparable qualities" of the Alberta nurse. As for Toronto, is not the fine piece of work carried on by the City Health Department referred to as a model of its kind all over the United States, as well as here at home? Everyone has not been there. Think of that system of generalized work with its group of specialist supervisors, and the store of wisdom there must be and *is*, because, when you *do* get to see them, they are so helpful and generous about imparting some of it. Then, in the largest city of all, there is a branch of a national organization which, in co-operation with other agencies, does generalized Public Health work too, but with bedside nursing as the fundamental principle. Here are such great possibilities of exten-

sion that, with patience, much may be achieved in the next few years, when they will probably be glad to talk about it.

In a general way, the following suggestions are offered as possible material for the Public Health Nursing Department:—

(1) Brief accounts of proceedings of meetings of Public Health sections.

(2) Announcements of Bills affecting the Public Health which are before the Provincial Legislature.

(3) Interesting items regarding developments in the foreign field.

(4) Notes on recent Public Health Bibliography and pamphlets—where obtainable, etc.

(5) Announcement of events pending, conventions or conferences of health or social workers in Canada and the United States.

(6) An occasional reprint from a medical journal. New theories, discoveries and experiments provide much interesting food for thought, and the very rapidity of their succession should tend to produce that much-to-be-desired characteristic—an "open mind". Recent graduates or those nurses intimately in touch with hospitals have this advantage of the older Public Health nurse, that they have greater opportunities of observing newer routines and procedures than their sisters in the field. However, until such time as students in training schools in Canada are given the opportunity, theoretically and practically, of learning the value of not only individual curative treatment, but in additon, having the equally necessary knowledge of the family and preventive aspects of disease, with the wider social outlook required for successful community work—just so long will there have to be the same upheaval, conversion and re-education of the nurse along certain lines when she comes to work outside. While apparently this last statement has little connection with the subject, it is implied that in going through the processes above mentioned with her often acquired thirst for information, it is altogether likely the Public Health Nurse is more apt to be appreciative of the occasional reprint than many others.

(7) Original articles—

(a) From such men as Dr. Hill, Dr. Hastings, Dr. McEachern, Dr. Royer, Dr. Wyatt and others.

(b) From Canadian nurses residing in the United States who may forget our existence, leading the strenuous lives they do, as for instance, Miss Nutting, Miss Hudson and Miss Carr, all interested in Public Health education and development.

(c) From people at home, in different lines of work, say Miss V. M. Macdonald and Miss Forshaw, both of whom have written considerably, and should not be allowed to slip through our fingers from any lack of appreciation. Dr. McMurchy, too, tells most interestingly the function and powers of the Dominion Board of Health.

(8) Brief historical sketches of the development of Public Health work in each Province, unless Miss Dickson's suggestion of last year has already been acted upon. The following is a quotation from her address at the Convention last June:—"At the beginning of a decade of the life of this Association, it might not be inopportune to suggest that you undertake the compilation of a History of Nursing in Canada. The existing records consist of from three to four pages as an appendage to fuller histories of other countries . . . . It would seem to be the very noonday of our opportunity to complete a Canadian History of Nursing, a copy of which should find a place in the libraries of every training school and every Municipality of the Dominion."

You will now have decided definitely that two or three pages is absolutely inadequate for the Public Health Department; and should these suggestions be dwelt on much more extensively, the other branches may feel embarrassed and in duty bound to withdraw and leave us in possession of the magazine. Let us avoid such a catastrophe, at least until we are better organized as a group throughout Canada. But cannot we, even in this little section, take a leaf from the magazine of the American National Organization of Public Health Nursing. This would imply that we strive to make the section a stimulus in developing the community's responsibility for the health of its people, by encouraging the extension and establishment of Public Health Nursing, by doing all we can to bring about co-operation between nurses, physicians and all others interested in Public Health, annd upholding Public Health standards. Who knows! Eventually this may lead even to the establishment of a central bureau for information and assistance in this service.

B. A. SMELLIE, R.N.,
Instructor in School of Graduate Nurses,
McGill University, Montreal

"Our Nurse"

My mother brought me from Italy when I was two months old. I was quite comfortable, for I had her milk to drink whenever I was hungry. She was not very happy, though. She did not like our dark, little house, and the cold weather, and she wanted more fruit and green things to eat than my father could buy. In Canada they cost so much.

One day a letter came for my mother. It said that her sister was dead in Italy. It made her cry all the day and even in the night. In the morning when I cried for milk there was very little there, and after that I never could get enough to eat. I used to be very hungry and I know I cried a lot. It worried my mother. She told my father that it was all because her sister had died. One day I was screaming, I was hungry. The woman next door came in. She did not understand our language, but when my mother showed her her empty breasts she went away and

brought a little tin box and a bottle with a rubber thing on the top like she gives her own baby to suck. She showed my mother how to take some sticky, white stuff from the box, and mix it with water from the tap. Then they put it in the bottle and gave it to me to drink.

I drank it because I was so hungry, but I did not like it. It was too sweet, and by and by it made my stomach ache. But my mother bought a box and gave some to me every time I cried, and I cried a great deal because that sweet stuff gave me such a pain and made me feel sick. I wanted to kick my legs when the pain got bad, but I was all bound up tight in a long bandage and I could not move. That made me more miserable than ever. I hoped my mother would understand and take off the bandage, but she didn't. She cried sometimes because I was getting so thin, but she did not know what to do for me.

One day a lady came to our house. She had a little brown bag, and she smiled at me. We could not understand what she said, but she pointed to the tin box and my bottle and my bandage and shook her head. I know she meant my mother to take the bandage off, but my mother just smiled and said "no speak", so the lady went away. I cried some more, I was so disappointed. The next day another lady came. She looked like the first one, but when she spoke we knew she was one of us, for we understood what she said. She told my mother that the sweet stuff was bad for me and was making me sick, and she herself undid the tight bandage and said to let me kick. I *was* glad. I began to feel better at once.

The next day she came again and took us both on a journey to a big house with a lot of babies and mothers. There was a man, too; he talked a lot to the lady and wrote things on a card. We did not understand, of course, but we knew they were talking about me and that the lady would explain it to us. Then we went home and she showed my mother how to cook water and milk out of a milkman's bottle for me to drink, and how to cook my little bottle and the rubber thing in water to make them clean. She told my mother to do it every day. They gave me some of the new milk. It *was* good and it did not make my stomach ache at all.

I lay and kicked my legs and was quite happy. My mother was so glad that she nearly cried, and she kissed the lady's hand when she went away.

The lady came to see us quite often. Sometimes she took me back to the big house to be weighed. I grew fat and strong quickly. Now I am big, nearly four. My mother tells me a story like this when I am good and mind our new baby. I call the lady "nurse". She often comes to see me and my little sisters. She likes my sisters, but she calls me "her boy".

MURIEL A. MARTIN,
Department of Public Health, Toronto.

The reports which follow were read by representatives from Manitoba and British Columbia at the annual meeting in Edmonton. They emphasize the outstanding features of the reports on Public Health Nursing from those provinces.

Clinic Service—An Aid to Public Health Nursing in Unorganized Territory

In discussing this subject and in reference to the report on Public Health Nursing in Manitoba, I would like to explain that while the Manitoba Red Cross Society does not employ any Public Health nurses, yet it does support four Public Service nurses, who are on the staff and under the direction of the Provincial Board of Health. It provides all equipment and supplies used at the Red Cross Nursing Stations, and for this year will provide the salary and expenses of a qualified doctor, who will visit each Nursing Station monthly for the purpose of holding clinics and visiting the sick in their homes.

This medical service was started in January of this year, and is controlled by a committee of members of the Red Cross Executive and Manitoba Medical Association. The Medical Service relieves the Public Service nurse of much responsibility that she formerly had to bear, there being no resident doctor in these districts.

In April of this year a dentist was also appointed by the Manitoba Red Cross.

(Signed) ELIZABETH RUSSELL,
Representing Convenor of Public Health Committee,
Manitoba Association of Graduate Nurses.

The Canadian Red Cross and its Relation to the Development of Public Health Nursing in British Columbia

Although the Red Cross has assisted greatly in the development of Public Health Nursing in British Columbia, we feel that the work is still in its infancy, for their plans are many and extensive. The problem of nursing in the rural districts has always been a great one, and the Red Cross is doing more perhaps than any other organization to help meet that need. Nurses have been placed in eleven rural districts and are doing excellent work. Several other districts have asked for nurses and they will soon be supplied.

The service has been strengthened in the following ways:—

(1) Improvement in equipment, especially for Pre-natal, School and Maternity Nursing.

(2) Outlines and instructions for Health Talks in the schools and attractive colored posters for illustrating the talks, also outlines for Little Mother classes.

(3) Full instructions and text books for conducting classes in Home Hygiene and Care of the Sick have been sent the nurses. A great

deal of interest is shown in these classes, and many of the members travel great distances in order to attend. This is a much-needed service in our sparcely settled Province where many of the people are great distances from medical help.

(4) A great deal of helpful literature on various phases of Public Health work and nursing have been sent to the nurses for their own benefit and for distribution because of their isolation. This is especially important to rural nurses, keeping them in touch with progress in their field. A monthly bulletin is written by the Director of Nurses and mailed to those in the field.

(5) Text books on such subjects as school Nursing have been sent to the nurses. A lending library on Public Health Nursing has also been made available for them.

(6) Lending closets are being equipped by some of the branches. This primarily is a service to the community but also assists the nurse.

(7) Hot soup and cocoa were served in a large number of the schools during the winter and milk in the warmer weather. Portable scales have been bought in most districts and the children weighed. The nurses have height and weight charts, and instruction on nutrition is given to the children and parents in cases of underweight and undersize.

(8) A Health Centre has been organized in one town. Its first activity has been to organize a Child Welfare Clinic.

(9) Individual First Aid kits are supplied at cost by one of our branches to the settlers, especially the unmarried men, who are not easily accessible to the Nursing center. A large, well-equipped First Aid cabinet is being placed in various parts of the district by the same branch.

(10) Numerous forms, such as information circulars, have been multigraphed for the nursing service as well as for the guidance of the branches.

(11) It has been suggested to the several Red Cross committees that a small consultative committee be formed to discuss with the nurse local problems which come within her province; ways and means for helping her, regarding equipment for carrying on her work, maintaining supplies for a lending closet, and helping in cases of relief, according to the advice of the nurse.

All phases of Public Health Nursing are developed. The nurses in the country carry on Pre-natal and Child Welfare Nursing and Educational Health work in the homes because the organization of clinics is not feasible, while in the towns the nurses make a special point of holding Well-Baby clinics. Emphasis is being laid on the conducting of Home Nursing classes, and, in order to carry such knowledge to the rural districts, an organizer is employed. She spends about two weeks in a district in order to stimulate interest in the organization of the classes

and to enroll classes for every afternoon and evening, especially Saturday. A First Aid class for children or a Little Mother class is enrolled for Saturday morning. The organizer is followed by a travelling instructor who conducts the classes. The teaching centres in the district are within easy reach of each other by automobile. The instructor is supplied with a suitcase compactly packed with equipment for class work. One hundred and forty-five women are in attendance at the classes in our district. The Junior Red Cross also interests girls of a district to help, by making surgical dressings and bandages, and some in filling First Aid kits for the schools.

A two-reel film entitled "an Equal Chance" has ben rented from the American Red Cross, and has been shown in several towns as a means of stimulating interest in establishing a Public Health Nursing Service. A complete set of slides on Home nursing classes has been borrowed from Red Cross Headquarters to stimulate the organization of such classes. Pathescope films to be used in country places. Where standard films may not be shown on account of lack of electricity is a district need, a.:d nurses are asked to send in pictures ot themselves in various phases of their work so that slides may be made showing the service in the Province.

(Signed) A. McLELLAN,
Convenor Public Health Committee,
Graduate Nurses' Association of British Columbia.

EDITOR'S NOTE.—In reply to a letter forwarded to Miss Emory, Chairman of the Public Health Section of the C.N.A.T.N., from Miss A. J. MacMaster, R.N., Superintendent of the Moncton Hospital, Moncton, N.B., I am asked by Miss Emory to make the following correction in the report of the public health activities of New Brunswick, which appeared in the September issue. It read: "A branch of the Provincial Laboratory has been opened in the Moncton Hospital under the Chief of Laboratories for the Province." Miss MacMaster requests that it be stated that "The Moncton Hospital maintains an absolutely independent laboratory, paid for and run by its own funds and under its own jurisdiction: it has no connection whatsoever with the Provincial Laboratory beyond an occasional tissue examination, for which this hospital pays the Department of Health as any common arrangement between a Laboratory and patron. The Moncton Hospital acknowledges no relationship with the Department of Health Laboratories, and decidedly is no branch or part thereof."

"Never tell all you know, for he who tells everything he knows often tells more than he knows."

—Arab Maxim.

Department of Nursing Education

Report of the Canadian Association of Nursing Education held in Edmonton, Alberta, June 23rd and 24th, 1922

In attempting to prepare this, the 15th annual report of the Canadian Association of Nursing Education Convention, I regret to state that up to this present date no report from the stenographer engaged for the purpose has been forthcoming, although every effort has been made to secure same—therefore, only a brief resume of the proceedings covering those relating to election appointments of convenors, new committees and resolutions, can be outlined for publication, even at this late date.

It does not seem necessary to reiterate the details of our social activities as already given in the report of the C.N.A.T.N. in the *Canadian Nurse*, of the social welcome and entertainments. However, I would like to say, briefly, that there must be unanimous appreciation of the cordial reception tendered us by the citizens of Edmonton, particularly His Honor, Lt.-Governor and Mrs. Brett, Medicine Hat Graduate Nurses' Association, Edmonton Graduate Nurses' Association, Alberta Registered Nurses' Association, the Academy of Medicine (Edmonton), the Mayor and Council, Board of Trade, President Tory and the University Faculty, the hotel management, the *Edmonton Journal*, the *Edmonton Bulletin*, and Mrs. Manson, convenor of arrangements committee, and her assistants, to all of whom the C.A.N.E. endorsed letters of appreciation, sent out by the C.N.A.T.N. secretary.

In the unavoidable absence of Miss Fairley, the president, Miss Hersey, first vice-president, presided, and briefly but fittingly responded to the addresses of welcome. Miss Hersey was appointed by the executive as representative to the C.N.A.T.N., with power to cast the votes, etc., of this association.

On motion, the minutes of the last annual meeting were taken as read. The report of the secretary, Miss Catton, showed that six executive meetings had been held during the year; that eleven new members had been added to the membership; that one member had resigned, two members had died, and three honorary memberships had been conferred; that the association had suffered a series of mishaps during the year, necessitating Miss McNeel's resignation as secretary, and Miss Flaw's withdrawal as acting secretary; that, owing to the fact that members do not notify the secretary of change of address, many on the list are incorrect; also that many of the names on the list are incomplete, some giving no Christian names at all, which accounts, possibly, for members not receiving letters or notices.

The address of the president, Miss Fairley, was read by Miss Hersey. Miss Fairley made appeal for constructive policy for social and religious activities among the students in training. She suggested that the policy be as broad as possible, including such work as English and dramatic classes, as well as religious instruction.

Miss Fairley expressed deepest regret that she was unable to attend the convention, and offered her warmest greetings, and asked that we as members do no allow sentiment to play any part in our policies, but to decide in all things as we feel is best for our particular work for the progress of nursing education.

The report of the treasurer, Miss Potts, was then read by the secretary, showing: Receipts for the year, $671.72; expenditures, $462.00; outstanding accounts, $65.79; balance on hand, 209.79.

The papers prepared and read, as stated on the programme, were all excellent in their salient points, and shall, according to motion, be published in the *Canadian Nurse* during the coming year. These papers dealt with the social life of the training school, recent developments in the nursing field, the valuation of practical work of student nurses in view of future university affiliation, the need of staff conferences and how to make them interesting, the art of questioning, the present tendency in nursing ethics, student Christian movement, history of the organization of the C.A.N.E., instructor's course and public health course, as given in the universities, standard text and reference books for use in training schools.

The outstanding features of the convention were:—

1. The strong note in favor of "Student Christian Movement" activities in the training schools.

2. A marked enthusiasm and support of maintaining the identity of the C.A.N.E. as a separate association and not as a section of the C.N.A.T.N.

3. The number of resolutions to be dealt with and the number of new committees formed, which are as follows:

(1) A committee on membership, whose function it will be to stimulate membership.

(2) A committee on training school records to make a selection of records for adoption in all training schools.

(3) A committee on scholarships to encourage the grants of scholarships for post graduate courses.

(4) A committee to make a survey of the practical work of student nurses in the training schools with special emphasis on tuberculosis, mental and communicable disease instsruction.

(5) A joint committee on education and the future policy of the C.A.N.E. in its relationship with the C.N.A.T.N., that the C.N.A.T.N. executive be approached and asked to appoint three members on this committee, on which the C.A.N.E. has appointed three members, the two presidents of the respective associations being members by virtue of their office.

On motion it was decided that the present committee on Student Christian Movement be continued and given power to add to its number, and that this committee accept the assistance of the Dominion Y.W.C.A. Council, and that all training schools be asked to co-operate in the development of this work, and to consider the sending of delegates from the student body of the Dominion Y.W.C.A. conferences: that local branches of the Y.W.C.A. be asked to approach the training schools in their respective localities, offering their assistance in regard to leadership and organization; that as many students are now entering our universities for post-graduate special courses, the universities be approached on the question of allowing credits for work already done by the nurses and included in the university course; that the present committee on text books and reference books be continued and go further into the preparation of a selected list for adoption in all training schools; that the present committee on venereal disease courses for student nurses be continued with power to add to the number; that the executive committee have certain definite periods for meeting and considering reports during the year—October 1st, January 1st, and April 1st were the dates decided upon.

The following new members were accepted into the association:—Miss Mae McCreary, Miss Jean Blyth, Miss Hazel Johnson, Miss Mabel Stewart, Miss Norah Gillespie, Miss Elizabeth McGibbon, Miss Cassie Flack, and Miss Ina Katherine Maule Cole, all of Ottawa, and Miss Daisy Hay Brown, of Montreal.

The following officers and councillors were elected:—President, Miss Mary A. Catton, Protestant General Hospital, Ottawa; 1st Vice-President, Miss F. M Shaw, McGill University, Montreal; 2nd Vice-President, Miss Annie Kinder, Children's Hospital, Winnipeg; 3rd Vice-President, Miss Eunice H. Dyke, Department of Health, Toronto; Secretary, Miss S. E. Young, General Hospital, Montreal; Treasurer, Miss Mary Shaw, Jeffrey Hales Hospital, Quebec City. Councillors: Miss G. M. Fairley, General Hospital, Hamilton; Miss M. F. Hersey, Royal Victoria Hospital, Montreal; Miss Jean Gunn, Toronto General Hospital, Toronto; Miss E. Johns, General Hospital, Vancouver; Miss Mary Martin, General Hospital, Winnipeg; Miss Eddy, General Hospital, Calgary; Miss J. MacKenzie, Jubilee Hospital, Victoria; Miss M. Branscombe, St. Stephens, N.B.; Sister Forfar, Calgary General Hospital, Calgary.

The following is a list of convenors and members of special and standing committees:—

NOMINATING COMMITTEE—Miss S. P. Johnson, Convenor; moved by Miss Gunn, seconded by Miss Hersey. Miss Locke, moved by Miss Gunn, seconded by Miss Hersey. Miss M. Martin, moved by Miss Edy, seconded by Miss Mary Shaw. Miss Bennett, moved by Miss Gunn, seconded by Miss Hersey.

COMMITTEE ON ARRANGEMENTS—Miss Rowan, Convenor; moved by Miss Gunn, seconded by Miss Hersey.

PROGRAMME COMMITTEE—Miss Dyke, Convenor; moved by Miss Gunn, seconded by Miss Edy; Miss Rayside, Miss Johns, Miss Kathleen Russell, and Miss Dempsey.

TEXT BOOK COMMITTEE—Miss F. M. Shaw, Convenor; moved by Miss Gunn, seconded by Miss Hersey.

JOINT COMMITTEE OF C.N.A.T.N. AND C.A.N.E.—Miss Fairley, Convenor; moved by Miss Gunn, seconded by Miss Hersey. Miss Gunn and Miss Hersey to act on Committee; moved by Miss F. M. Shaw, seconded by Miss Mary Shaw.

VENEREAL DISEASE COMMITTEE—Miss Gunn be asked to complete the work; moved by Miss F. M. Shaw, seconded by Miss Edy.

COMMITTEE ON MEMBERSHIP—Miss Bennett, Convenor; moved by Miss Gunn, seconded by Miss F. M. Shaw; Miss Johns, Miss Edy, Miss Mable Gray, Miss Kinder, Miss Winslow, Miss Strumm, Miss Turner, Miss Fairley, Miss M. Shaw, and Miss W. MacLeod.

COMMITTEE TRAINING SCHOOL RECORDS—Miss Gunn, Convenor, with power to appoint her own committee; moved by Miss Shaw, seconded by Miss M. Shaw.

COMMITTEE ON SCHOLARSHIP—Miss K. Russell, Convenor, with power to appoint her own committee; moved by Miss Hersey, seconded by Miss F. M. Shaw.

SURVEY COMMITTEE—Miss Dickson, Convenor, with power to appoint her own committee; moved by Miss Gunn, seconded by Miss Hersey.

STUDENT CHRISTIAN MOVEMENT COMMITTEE—Miss Muriel Martin, Convenor.

Special mention should be made of Mrs. Manson and her committee on arrangements. In appreciation, this Association presented Mrs. Manson with a large boquet of roses at the completion of the convention.

On invitation, this association decided to hold its next annual meeting in 1923, in Toronto.

In conclusion, the Secretary regrets being unable to give to the members in this report, through the medium of the *Canadian Nurse*, a detailed report on the proceedings, especially in reference to resolutions and other important details, and hopes to be able to do so at some future date during the year.

Respectfully submitted,

MARY A. CATTON, President
(as retiring Secretary).

Hospitals and Nurses

NOVA SCOTIA

The cornerstone of the Medical Science Laboratory of Dalhousie University was laid September 29th, with simple but impressive ceremonies. The stone was laid by Dr. John Stewart, Dean of the Faculty of Medicine, and addresses were given by Professor Falconer, President MacKenzie and Dr. Stewart.

A fine attendance of the medical men of the province showed the appreciation of the post-graduate course given by Dalhousie University. Besides the lectures and clinics an opportunity was given the students to visit the school clinics, the pre-school age dental clinic, well-baby clinic, venereal and chest clinics, and many finished their visit by making an excursion to the vegetable gardens, where thirty families, under guidance of the nurses, developed gardens producing vegetables suited to the needs of each family.

* * * *

QUEBEC

Montreal Women's Hospital

Dr. Reddy and Miss Trench represented the Montreal Women's Hospital at the Atlantic City meeting of the American Hospital Association, in September, 1922. Miss L. Edwards acted as Superintendent during Miss Trench's absence and Miss Francis as Assistant Superintendent.

Royal Victoria Hospital, Montreal.

Miss Helen Rogers, who has ben one of the Assistants in the operating room since graduation in 1921, has left to take charge of the operating room in Sprinfield Hospital, Springfield, Mass.

Jeffery Hales' Hospital, Quebec.

Miss Violet Horner (1920) has accepted a position as Instructress of Nurses on the staff of the Wm. A. Foote Memorial Hospital, Jackson, Mich.

Miss H. Mackenzie (1919) has accepted the position of dietitian at the Jeffrey Hale's Hospital.

Miss E. Matheson (1920) has spent the summer at Peter Bent Hospital, Boston, Mass., as Ward Supervisor.

Miss E. Mackay (1904) is the welfare nurse at the Donnarona Paper and Pulp Co.

The position of Theoretiral Instrustress at the Jeffrey Hale's Hospital has been filled by Miss Eva Armour (1921).

Montreal General Hospital

At the September meeting of the Alumnae, Miss Young gave a most interesting report of the Edmonton Convention.

Changes and appointments on the staff of the M.G.H., are as follows:—Miss Eleanor Hancock appointed as second assistant to the Superintendent of Nurses; Miss Barnes on Night Staff as 2nd Assistant to Miss Webster, Night Superintendent; Miss Lynam (1922) to the O. D. Staff; Miss Middleton (1922), has accepted the position on the S.O.R. staff in the position resigned by Miss Janie Jamieson (1921); Miss Evelyn MacGregor resigned for Supervisorship of O. & K. Wards, succeeded by Miss Christena Denovan, lately Assistant Night Superintendent. Her position has been filled temporarily by Miss Morrison.

The M. G. H. Scholarship at McGill University has been obtained by Miss Louise McLeod, in Hospital Administration, and the Mildred Forbes Scholarship by Miss Nancy Curwell in Public Health. Miss Olive MacKay is also taking the course in Hospital Administration and Miss Minnie Eugelke in Public Health.

Miss Isabel Symonds (1919) and Miss J. Dunlop (1922), are taking a six months' course in Pediatrics in New York City.

Miss Olive Welsh is on the staff of the Presbyterian Hospital, New York.

Miss Georgia Colley is the delegate from the C. N. A., to the meeting of the Registered Nurses of the Province of Quebec, which is to be held in Quebec City on October 26th.

Miss Alice Ketchen sailed for England recently to accompany her brother, who has been ill, to his home in South Africa.

The Alumnae sent sympathy to Miss Jennie Walsh (1918), who has been ill for some time at the M. G. H., with hopes for speedy recovery.

Miss Lily Gray (1913) completed recently the Summer Course at Columbia University.

The Alumnae Association extend sympathy to the Misses MacKay in the loss of their sister, also to Miss Eaton, who suffered the same bereavement, and to Mrs. LeGrande (Grace Lawrence), New Carlisle, Que., in the loss of her only daughter, in August, aged four years.

The members of the M. G. H. A. A. are taking an active interest in a bazaar given in November by the C. N. A. to help raise funds for a Club House for Nurses in Montreal. Everything points to a successful event.

Children's Hospital, Montreal

Miss Maddocks, Assistant Superintendent, C. M. H., has returned from England after a visit of several months.

Miss Gladys Boyes, former Assistant Superintendent of C. M. H., has been appointed Instructress of Occupational Theraphy at the Kalamazoo State Hospital, Kalamazoo, Mich.

Miss D. Osmond (1922) has been appointed Supervisor of the operating room.

Miss Maclatchie (1922) has been appointed supervising nurse of the Infants' Ward, C. M. H.

* * * *

ONTARIO

Hospital for Sick Children, Toronto

The Alumnae had a very enjoyable opening meeting recently, when dainty blue and white material was bought and bed jackets made for the children in the hospital.

Miss Mary Aitken (1915), has taken a position in Edmonton.

Miss Gertrude Spanner is leaving Winnipeg, having accepted a position in the Children's Hospital.

The Heather Club Chapter of the I.O.D.E. held a very successful autumn fete on October 12th. Mrs. Cockshutt declared the fete open, making special mention in her brief address of the wonderful work done by the women's organizations, who had started with very little financial reserve.

The dance in the evening was arranged by the Alumnae Association of the Hospital for Sick Children.

The Smith's Falls Graduate Nurses' Association recently arranged a tea, which raised $75.00 for the Nurses' Memorial Fund.

Toronto General Hospital.

Misses Margaret McCort (1911) and Esther Strachan (1922) have been appointed night supervisors in the Private Pavilion, T. G. H.

Miss Georgia McCulloch (1920) has accepted the position of Instructress at the Toronto Orthopedic Hospital, Toronto.

Miss Edna McNaught has resigned from the Training School office staff, T.G.H., and Miss Margaret Dulmage (1918) has been appointed in her place.

Miss Alice Thompson (1921) has taken a position with the Victorian Order of Nurses in Toronto.

Miss Elsie Hickey, Supervisor in the Department of Public Health, Toronto, and Miss Mabel Sharpe (1919) have gone to Haileybury to assist in the relief of the fire sufferers.

Miss Maud Coatsworth (1916) has resigned from the staff of the T.G.H. She has been awarded a Red Cross Scholarship and is taking the course in Public Health Nursing at Toronto University, as is also Miss Rae Shipman (1921) who gained a V.O.N. scholarship.

Miss Scadding has recently taken charge of the 5th floor, Private Pavilion, T. G. H. Miss Fiddler (1919) is now in charge of the Admitting Department.

We are sorry to learn that Miss Ruby Berry (1914) has undergone a serious operation at the T. G. H.

Miss Lilian Thomas (1917) has accepted the position of Operating Room Supervisor in Evanston Hospital, Evanston, Ill.

The engagement is announced of Miss Olive James (1919) to Dr. Will Holmes, the marriage to take place this autumn.

GUELPH.

The Guelph General Hospital A. A. held their annual meeting on September 19th, at the residence of Miss Moore, with a good attendance of members. Reports of committees were satisfactory, special note being taken of the financial report, showing a marked improvement over other years. The Social Committee reported a euchre tea and a dinner for the graduating class of 1922. This was an innovation this year, but was so much appreciated that it was determined by vote to make this an annual event. The special committees reported sending fruit and flowers to the sick nurses, donations to Russian Relief, etc. During the year the Alumnae has lost two very good friends in the persons of Dr. Roberts and Mr. Sinner. The latter spent a life-time in the service of the hospital, and his passing is deeply regretted by all graduates of the hospital. The meeting adjourned after refreshments had been served.

BRANTFORD.

The annual Graduating Exercises were held at the Brantford General Hospital, on September 14th, 1922, when the 1922 class of thirteen graduates received their diplomas. Miss Verna Woods had the honor of winning the scholarship for the highest class standing, while Miss Mabel Moss received the 2nd class scholarship. Miss Alberta Bartley was presented with the $25 gold piece given by the A. A. for general proficiency. Miss Annabel Hough won the Gold Medal for highest standing in Obstetrical Nursing. On the evening of September 19th the Alumnae entertained the class at a most enjoyable dance in the "Winter Garden."

HAMILTON

Rev. J. H. and Mrs. Sandercock (nee Fellows) have returned from Central Africa, after three years in mission work. Mrs. Sandercock will address the nurses at the November meeting of the Alumnae.

Mrs. Haygarth has resigned her position at the V. D. Clinic and is now taking the Public Health Nursing course at the University of Toronto, having obtained the scholarship of the G.N.A.O.

The Public Health Department has added Misses McNamara, Bett, Aitkens and Cora Taylor to the staff permanently, and Misses Flintoc and Inwin on the temporary staff.

Miss M. Brener gave a very interesting report of the Edmonton Convention at the last meeting of the A. A. The St. Joseph's Hospital A. A. were also invited to be present, as well as members of the G.N.A.O. resident in Hamilton. Miss Fairley, Superintendent of Nurses of the City Hospital, served tea in the beautiful new Residence for Nurses.

BELLVILLE GENERAL HOSPITAL

The pupil nurses of the General Hospital held a garden party and dance September 6th, for the benefit of the Memorial Fund. The day, orchestra, decorations and refreshments were all the nurses could desire, and the handsome sum of $154.00, clear of expenses, was the result of the energy and enthusiastic work of the pupils of this hospital.

* * * *

SASKATCHEWAN

SASKATOON

The regular monthly meeting of the G.A.N. was held October 5th at the home of Miss Sadie McEwan. It was decided at this meeting that hereafter the nurses of Saskatoon would do hourly nursing according to the plan adopted successfully elsewhere.

Sewing for the Babies' Home will be one of the activities of the association this winter.

Arrangements have been made for the "At Home" to be held October 30th, the proceeds to be applied to the Canadian Nurses' Memorial. At this function, the senior pupils of the City and St. Paul s hospitals will be the special guests.

Miss Macey, R.N., addressed the meeting, taking for her subject the difference between the minimum and the standard curriculum for the training schools.

* * * *

ALBERTA

CALGARY.

At the annual meeting of the C.A.G.N., on September 14th, in the Y. W. C. A. parlors, the following officers were elected for the ensuing year: Mrs. R. P. Stuart Brown, re-elected President; 1st Vice-President, Mrs. A. H. Calder; 2nd Vice-President, Miss Willison, R.N.; Recording Secretary, Miss Bishop, R.N.; Treasurer, Miss Parks; Corresponding Secretary, Miss L. Phillips, R.N., 8 Wallace Apartments, Calgary; Registrar, Mrs. J. Stewart Whyte. Mrs. A. H. Calder, Miss M. MacNear, R.N., and Miss B. A. Beattie, R.N., were chosen as delegates to attend the meetings of the Local Council of Women. The President outlined the past year's work,—addresses had been given by several physicians, teas and dances had helped to swell the finances, and delegates had been sent to three different conventions during the year. One member had died, ten had been married, and flowers sent to members who had been ill.

Reports of the various committees were read and adopted, and it was the general feeling of the association that, though the past year had been a successful one, it was hoped that the coming year would be even more so.

Miss Kelly's removal from the city, though temporary, was felt to be a great loss to the Association, and the members look forward to her return.

The October meeting of the C.A.G.N. was held on October 12th in the Y.W.C.A. parlors, with the President, Mrs. R. P. Stuart Brown, in the chair.

In the correspondence connected with the routine business was a letter from Miss Helen Randal, R.N., containing a warning against fakers selling subscriptions to "The Canadian Nurse" magazine, as well as other magazines, and who were not authorized to do so and who kept the money so received. In addition, she made an urgent appeal for more subscribers to our only Canadian nursing magazine. It is hoped that each nurse in Calgary who is not now a subscriber will immediately send $2.00 to Miss Helen Randal, R.N., Editor of "The Canadian Nurse", 125 Vancouver Block, Vancouver, B.C., or to the Calgary Convenor, Miss Bella, R.N., 318 21st Ave., W., Calgary, Alberta.

Miss Jessie Forshaw, Dominion Inspector of the V.O.N., gave a very interesting address, with an account of the work done by the order. She spoke of the scholarships of $400.00 given to nurses from standardized training schools desiring to take a post-graduate course in Public Health Nursing at the various Canadian Universities.

Miss A. Phillips, R.N., gave the report of the conventions of the Alberta Hospital Association and Alberta Association of Registered Nurses held in Edmonton in September, 1922.

The resignation of the Registrar was accepted.

* * * *

BRITISH COLUMBIA

The graduate nurses of Victoria are co-operating with the 5th Regiment and 16th Canadian Scottish for a grand military ball to be held November 6th in the Armory, when the nurses hope to raise their allotment for the Memorial Fund for Overseas Sisters.

Miss Lucy Pringle, R.N., left recently to take charge of the hospital at Atlin, B.C.

Miss Myrtle Wheeler (V.G.H.) returned October 5th to China, where she is on duty at Cheng-tu, West China. Miss Wheeler has spent her year for furlough between Toronto and Vancouver.

Miss Ethel Endacott, R.N. (Vancouver General Hospital) has accepted a position on the staff of the Prince Rupert General Hospital.

Miss H. M. Hamilton (V. G. H.) who recently resigned from the staff of the Prince Rupert Hospital, has accepted a similar position at the Port Simpson General Hospital, Port Simpson, B.C.

Mrs. E. McCutcheon (Hazelton General Hospital) has been appointed to the staff of the Hazelton Hospital.

Miss Gertrude Black (Royal Jubilee Hospital, Victoria) has been appointed to the staff of the Summerland Hospital to take the place of Miss Lily Wilson (Massachusetts General Hospital), who has accepted a position in the hospital at Francis Lake, B.C. A most enjoyable dance was given as a farewell to Miss Wilson at the Summerland hospital on October 11th by the hospital staff.

Miss Blanche Wells, R.N. (Newport Hospital, Newport, R.I.) has resigned her position as Superintendent at the Chemainus General Hospital to accept one as Operating Room Supervisor at the Royal Columbian Hospital, New Westminster, B.C. Miss Bird (St. Joseph's Hospital, Victoria), is in charge of the hospital at Chemainus.

BIRTHS

Banbury—On September 5th, 1922, to Mr. and Mrs. J. R. Banbury (Isabel Fasker, Toronto General Hospital, 1919), a daughter.

Kirkby—At Fort Qu' Appelle, on July 20th, 1922, to Dr. and Mrs. R. W. Kirkby, a daughter, Jean Marie.

Marlatt—At Neville, Sask., on August 5th, 1922, to Dr. and Mrs. C. A. Marlatt (Irene Gray, Montreal General Hospital), a daughter.

Odland—On August 27th, 1922, at Minneapolis, Minn., to Dr. and Mrs. Henry Odland (Alice Fisher, Royal Victoria Hospital, 1915), a son.

Wiley—At Regina, Sask., on Sunday, June 11th, 1922, to Mr. and Mrs. T. W. Wiley, Suite 4, Regina Court, a daughter.

MARRIAGES

Clapperton-Essery—In Palmerston, Ont., on August 30th, 1922, Madeline Essery (Toronto General Hospital, 1921), to Walter Clapperton, of Toronto.

Clark-Campbell—In Parry Sound, Ont., on September 27th, 1922, Adelaide Campbell (Toronto General Hospital, 1918), to Arthur Clark, of Toronto.

Currie-Hanna—On August 23rd, 1922, at Fort Collins, Colorado, Winifred R. Hanna (Royal Victoria Hospital, 1917), to Clarence G. Currie, Esq.

Delany-Barry—At Regina, Sask., on September 28th, 1922, Mina Jane Barry (Montreal General Hospital, 1910), to Earnest E. Delany, of Swift Current, Sask.

Harris-Dennis—At St. Paul's Church, Regina, Sask., on July 26th, 1922, by the Rev. Archdeacon Dobie, Gwendolyn Dennis (Regina General Hospital) to Mr. Leslie Harris.

Howell-Murray—In Kingston, on September 30th, 1922, Lillian I. Murray, (Toronto General Hospital, 1919), to Dr. Harrison Howell, of Galt, Ont.

Lye-McNevin—In Toronto, on September 2nd, 1922, Rose Irene McNevin (Toronto General Hospital, 1918), to Reginald Henry Lye, of Colborne, Ont.

MacRae-Bruce—At the home of the bride's parents, 9 Basset Avenue, Montreal, on September 29th, 1922, by the Rev. K. MacLennan, of Gould, Que., Margaret Dorothea Bruce (Montreal General Hospital, 1920), to Walter Sage MacRae, of Lodi, Ont. Mr. and Mrs. MacRae will reside in Lodi, Ont.

McNeiley-Eaton—At Truro, N.S., at the home of the bride, in August, 1922, Marjorie Eaton (Montreal General Hospital, 1918), to Mr. McNeiley. They will reside in Montreal, Que.

Mechado-Moreshead—On September 4th, 1922, at George St. Methodist Church, Sydney, N. S., Eleanor Gorrill Morehead (Royal Victoria Hospital, 1915), to Gerald C. Mechado, M.D. Dr. and Mrs. Mechado will reside in Notre Dame de Grace, Que.

Parsons-Knapp—At Kingston, Ont., on September 4th, 1922, Elsie Irene Knapp, of Kingston (Montreal Women's Hospital, 1913), to Reginald Parsons, M.D.C.M., of St. Johns, Newfoundland.

Patterson-O'Regan—On June 15th, 1922, Laura O'Regan (1917) to Mr. G. H. Patterson. Mr. and Mrs. Patterson reside in Quebec City.

Ross-Brydone-Jack—At St. James' Church, Bellingham, Wash., on July 8th, 1922, Blanche Lolita (Vancouver General Hospital), eldest daughter of Mrs. Katherine M. Sprague, of Vancouver, to Mr. Allan Casper Ross, of Vancouver, B.C.

Scott-Stewart—On August 1st, 1922, by Rev. Prof. R. E. Welsh, of Presbyterian College, Montreal, Lillian Alexandra Stewart (Montreal General Hospital, 1917), of Howick, Que., to W. Beverley Scott, B.Sc., of Grande Mere, Que.

White-Conlin—In Toronto, on September 11th, 1922, Irene Conlin (Toronto General Hospital, 1919), to Robert White, of Toronto, Ont.

DEATHS

Simpson—At Syracuse, N. Y., on August 8th, 1922, Nursing Sister Anne Simpson, of Thornhill, Ont. Miss Simpson was a graduate of St. John's Hospital, Brooklyn. She served in France from 1916 to 1919, being attached to No. 1 Canadian General Hospital, Etaples; No. 10 Canadian Stationary Hospital, Calais; No. 2 Canadian C. C. S., and the I. O. D. E. Hospital, 1 Hyde Park Place, London.

Take up another's load it carries ours.
It is the weight of self that overpowers;

—*Langbridge.*

Recreation, which some may despise, thinking it a waste of time, or only proper for children or the idle, is a vital necessity to both physical and mental health for all. We neglect or reject it at our peril. The form of it cannot be prescribed by one man for another. It need not necessarily involve physical exercise, for the essence of it lies in our attitude of mind towards it. For one of us aviation may be the ideal recreation, for another chess. For many golf is a splendid antidote to nerves, whereas to myself, who want a moving ball to hit, it would go unspeakably wearisome. For most of us—and the others are to be pitied—music is the very medicine of the soul. But whatever form we prefer, recreation we should have, for our duties wear us away, and recreation recreates us. To find for the nervous man a new hobby that absorbs and delights him is to have cured him.

—*Dr. C. W. Saleeby, F.R.S.*

WANTS

EXECUTIVE SECRETARY

Applications for the position of Executive Secretary of the Canadian National Association of Trained Nurses—with headquarters in Winnipeg—will be received by Miss Jean Browne, President of the C.N.A.T.N. 410 Sherbourne St., Toronto.

Applicants must be members of the C.N.A.T.N., and nurses of experience and executive ability. All applications must be in before January 1st, 1923.

Bellevue Hospital, New York City offers to registered nurses seventy-two dollars per month and maintenance during June, July, August and September for vacation relief.

Positions in Psychopathic Department $80. per month and maintenance.

Address General Superintendent of Training Schools.

WEDDING CAKES
A SPECIALTY

COLES

Caterer and Manufacturing Confectioner

719 Yonge Street, Toronto

The Graduate Nurses'
Residence and Registry

PHONE SHERBROOKE 630
DAY OR NIGHT

753 Wolseley Ave., WINNIPEG

I do not think any woman would desire to have a lower status of responsibility than any other citizen.—*Judge Parry.*

THE GRADUATE NURSES' ASSOCIATION OF NOVA SCOTIA HALIFAX.

President, Mrs. H. R. McLarren; Vice-Presidents, Miss K. O. McLetchey, R.R.C.; M. P. M. Watson, Yarmouth; Sister Ignatius, Glace Bay; Secretary, Miss Gertrude Crosby; Treasurer, Miss M. Keating; Corresponding Secretary, Miss Goddard.

THE NEW BRUNSWICK ASSOCIATION OF GRADUATE NURSES

President—Miss Murdoch, G.P.H., St. John; 1st Vice-President, Miss L. Belding, St. John; 2nd Vice-President, Miss Elizabeth Sanson, Fredericton; 3rd Vice-President, Miss MacMasters, Moncton; 4th Vice-President, Miss E. Keys, Newcastle; 5th Vice-President, Miss A. Branscombe, St. Stephen; Treasurer, Miss E. J. Mitchell, G.P.H., St. John, N.B.; Recording Secretary, Mrs. L. R. Dunlop, St. John; Corresponding Secretary, Miss Martha Fraser, 26 Meadow Street, St. John; Provincial Registrar, Miss A. Whyte, Doaktown, N.B.; Public Health Correspondent, Miss Sarah Brophy, Fairville, N.B.; Miss Martha Hoyt, St. John; Canadian Nurse Correspondent, Miss Eva Craig, G.P.H., St. John. Regular Monthly Meeting of Executive, 2nd Monday, 8 p.m.

ALUMNAE ASSOCIATION OF JEFFREY HALE'S HOSPITAL, QUEBEC.

Honorary President, Miss Mary Shaw; President, Mrs. M. K. Craig; First Vice-President, Miss White; Second Vice-President, Miss MacKay; Recording Secretary, Miss A. Murphy, 247 St. Cyrille Street, Quebec; Corresponding Secretary, Miss Una Gale; Treasurer, Miss M. Fischer.

Executive Committee—Miss May, Miss Lenfesty, Miss C. Kennedy, Miss Black, Miss Wilson. Refreshment Committee—Miss D. Binning, Miss Fellows.

Representative to the "Canadian Nurse"—Miss V. Horner.

Sick Visiting Committee—Miss G. Mayhew, Miss E. Jack.

Regular meeting first Monday at 8 p.m.

OFFICERS OF THE ALUMNAE ASSOCIATION OF THE SHERBROOKE HOSPITAL, SHERBROOKE, QUE.

President, Mrs. Wilfred Davey; First Vice-President, Mrs. C. K. Bartlett; Second Vice-President, Miss Buchanan; Recording Secretary, Miss Jessie Saint-Denis; Corresponding Secretary, Miss Van; Treasurer, Mrs. Colin Campbell; Representative to "Canadian Nurse," Mrs. Roy Wiggett, Apt. 17, Mon. Nationale, Sherbrooke; Regular Monthly Meeting—Second Tuesday.

THE ALUMNÆ ASSOCIATION OF THE ROYAL VICTORIA HOSPITAL, MONTREAL, QUE.

Honorary President, Miss E. A. Draper; President, Miss Goodhue; First Vice-President, Miss A. L. Campbell; Second Vice-President, Miss Bellhouse; Recording-Secretary, Mrs. E. Roberts, 360 Prudhomme Avenue; Corresponding-Secretary, Miss M. A. Prescott; Treasurer, Miss Lillian Pidgeon; Treasurer of Pension Fund, Miss Milla MacLellan;; Executive Committee—Miss Hersey, Miss A. M. Hall, Miss Etter, Mrs. Stanley, Miss Guernsey, Miss B. Stewart; Programme Committee, Miss Katherine Davidson; Representative to Canadian Nurse, Miss Grace Martin; Representatives to Local Council of Women, Mrs. H. T. Lyons and Miss Winnifred Bryce; Sick Visiting Committee, Convener, Mrs. M. J. Bremner, 225 Pine Avenue West. Phone Up. 3861. Regular meeting—Second Wednesday, at 8 p.m.

THE ALUMNAE ASSOCIATION OF THE WESTERN HOSPITAL, MONTREAL

Hon. President, Miss J. Craig; President, Mrs. J. Pollock; First Vice-President, Miss C. Rowley; Second Vice-President, Miss H. Williams; Treasurer, Miss J. Craig, Western Hospital, Montreal; Secretary, Miss B. A. Dyer, Western Hospital, Montreal, Quebec.

Convener of Finance Committee—Miss B. A. Birch, Western Hospital.

Convener of Programme Committee—Miss Ada Chisholm.

Convener of Membership and Visiting Committee—Miss Ethel Mount.

Convener of General Nursing Committee—Miss B. A. Birch.

Representative to Canadian Nurse—A. M. Stephens.

CLEVELAND MATERNITY HOSPITAL AND DISPENSARIES OF WESTERN RESERVE UNIVERSITY

has, in the interest of obstetrical nursing, assumed the responsibility of a three-year course. This course has been planned for students who wish to major in obstetrics. Opportunity to study all branches of obstetrical nursing will be given the student in the last eight months of the senior year.

The fundamental studies are arranged for through affiliations with General Hospitals.

Outline of Course

Preliminary Course, 4 months, given at hospital of Student Affiliation.

Medical Nursing	6 months
Surgical Nursing	3 months
Operating Room	2 months
Children's Nursing	3 months
Diet Kitchen	2 months
Contagious	2 months
Eye, Ear, Nose, Throat, Tuberculosis, Mental and Skin	6 months

Maternity Hospital—Last 8 Months

Mothers	2 months
Babies	2 months
Delivery Room	1 month
Parental, Delivery and Postpartum experience	2 months
Milk Laboratories	1 month

Allowance

Books, uniforms and maintenance throughout.

Four weeks vacation each year.

POST GRADUATE COURSE

A Post-Graduate Course of four months is arranged for graduates of accredited schools. Maintenance and $25.00 per month for uniforms and books is allowed.

The Affiliated Course prepared for students of schools with limited or no obstetrical service is as comprehensive as the time allowed by the individual affiliating school will permit.

Apply, Superintendent, Maternity Hospital,
3735 Cedar Avenue, CLEVELAND, OHIO.

THE ALUMNAE ASSOCIATION OF THE WOMEN'S HOSPITAL, MONTREAL

Honorary President, Miss E. F. Trench, Superintendent of Nurses, Women's Hospital; President, Miss Seguin, 1353 Clarke Street; Vice-President, Miss Francis, Montreal; Secretary-Treasurer, Miss G. MacDougall, 86 St. Luke Street.

Conveners of Committees—Finance, Miss E. F. Trench; Sick Visiting, Miss MacVicar, Miss F. Cantor.

Representative to the "Canadian Nurse"—Miss S. E. Almon Mowry, 86 St. Luke St.

Regular Monthly Meeting—Third Wednesday, 8 p.m.

THE ALUMNÆ ASSOCIATION OF THE CHILDREN'S MEMORIAL HOSPITAL TRAINING SCHOOL FOR NURSES, MONTREAL

Hon. President, Miss Willoughby; President, Miss C. Macdonald; Vice-President, Miss Elsie Wood; Secretary Treasurer, Miss K. Maddocks.

Board of Directors—Miss Armour and Miss Morris.

Canadian Nurse Representative—Miss E. G. Miller.

Regular Meeting, First Friday of each month at 8.30 p. m.

THE ALUMNAE ASSOCIATION OF THE HOMEOPATHIC HOSPITAL. MONTREAL, QUE.

Honorary President, Mrs. H. Pollock, Superintendent of Homeopathic Hospital; President, Miss M. Richards, 166 A. Mansfield Street, Montreal; First Vice-President, Miss H. O'Brien, Homeopathic Hospital; Secretary, Miss I. Garrick, 414 Pie IX Boulevard, Montreal; Assistant Secretary, Miss M. Lunny, 357 Oliver Avenue, Montreal; Treasurer, Miss N. Dickson, Homeopathic Hospital; Conveners of Committee: Finance—Miss D. Miller; Sick Visiting—Misses Beuchanan, Taylor, Swan, Barr, Sanders.

Representative to the Canadian Nurse—E. Routhier, 4 Oldfield Ave.

Regular Monthly Meeting—First Thursday at 8 p.m.

THE ALUMNAE ASSOCIATION OF THE MONTREAL GENERAL HOSPITAL, MONTREAL

President, Miss Mabel Davies; First Vice-President, Miss Holt; Second Vice-President, Miss Frances Reed; Recording Secretary, Miss Kirkland; Corresponding Secretary, Miss Miriam Gray; Treasurer Sick Benefit, Miss Henrietta Dunlop. Executive Committee, Misses F. M. Shaw, Winifred Scott, Nora Tedford, F. Struthm and Ruth Loggie; Sick Visiting Committee, Misses C. S. McLeod, Bessie Briggs, Jane Home and Gwendoline Nichol. Representatives to Local Council of Women, Mrs. F. Lamb and Miss Hardinge; proxies, Miss Holt and Mrs. Hardwick.

Representative of the "Canadian Nurse" Magazine, Miss Agnes Jamieson, 975 Tupper Street, Montreal.

THE CANADIAN NURSES' ASSOCIATION, MONTREAL

President, Miss Phillips, R. N., 750 Urban Street; First Vice-President, Miss Daisy Hay-Brown, R. N. 39 St. Lulle Street; Second Vice-President, Miss Florence Thomson, R.N., 165 Hutchison St.; Secretary-Treasurer, Miss Susie Wilson, R.N., 638a Dorchester St., W.; Registrar, Miss Lucy White, R.N., 638a Dorchester St. W.; Convener, Miss Georgie Colley, R.N., (Griffintown Club), 261 Melville Ave., Westmount.

Regular Meeting, First Tuesday, 8 p.m.

ASSOCIATION OF REGISTERED NURSES FOR PROVINCE OF QUEBEC.

President, Miss F. M. Shaw, 56 Sherbrooke St., W.; Vice-President, Miss Hersey, Royal Victoria Hospital; Secretary-Treasurer, Miss L. C. Phillips, 750 St. Urbain St., Montreal, P.Q.; Committee—Misses Young, Craig, Samuel, Lawrence, Guillemette, Noel, Jameson, Hetherington, Sister Fafard.

DR. JUNIOR: "Doctor, there is just one other interesting point I had overlooked, and one you may be able to explain."

DR. SENIOR: "Well, what is it?"

DR. JUNIOR: "The old-fashioned poultices—bread-and-milk, linseed meal, and so on—always grow so cold in a few hours as to give one the creeps, almost——"

DR. SENIOR: "Exactly. Go on——"

DR. JUNIOR: "Antiphlogistine, I have observed, retains its heat for as long as twenty-four hours. How do you account for that scientifically?"

DR. SENIOR: "In this way, Doctor. Antiphlogistine, a scientific product, is the result of a working knowledge of Chemistry as well as Physics. The heat-retaining property is due to the chemical reaction which goes on during osmosis between c. p. glycerine of Antiphlogistine and the waters of the tissues. It is constant until full saturation has been reached—which averages about twenty-four hours."

DR. JUNIOR: "I see where you are right in maintaining that Antiphlogistine is not a mere 'poultice'. I had my doubts about it remaining warm for such a long time."

THE ALUMNAE ASSOCIATION OF ST. LUKE'S HOSPITAL, OTTAWA, ONT.

President, Miss Margaret Moore; Vice-President, Dr. M. J. McCurdy; Treasurer, Miss G. Stanley; Secretary, Miss E. Grace Woods; Nominating Committee. Miss Church, Miss Lovering, Mrs. Way.

Representative to Ottawa Chapter—Miss M. Nelson.

Representative to Local Council of Women—Miss Hewitt.

Representatives to Central Registry—Miss N. Lewis, Miss E. G. Woods.

Regular Meeting—Third Thursday, 4 p.m.

THE NURSES' ALUMNAE ASSOCIATION OF OTTAWA GENERAL HOSPITAL.

Hon. President, Rev. Sr. Mary Alice; President, Mrs. J. L. Chabot, 170 Laurier Ave., E.; Vice-Pres., Miss M. Brankin; Sec'y-Treas., R. A. Waterston, 91 Daly Ave.. Membership Sec., Miss M. Kennedy. Board of Directors, Mrs. J. W. Anderson, Mrs. C. Devitt, Mrs. A. Poulton, Miss F. Lyons, Miss L. McElroy, Miss G. Evans, Miss A. Stackpole. Representatives to Central Registry: Miss M. Kennedy, Miss E. Dea, Miss A. Stackpole. Representative "Canadian Nurse' Magazine—Miss Nevins. Representatives to Local Council of Women—Mrs. J. L. Chabot, Mrs. Latimer, Mrs. Devitt, Mrs. Viau. Representative to Catholic Women's League—Mrs. J. L. Chabot.

Regular Meetings, First Friday of each month at 8 p.m.

THE FLORENCE NIGHTINGALE ASSOCIATION OF GRADUATE NURSES, OTTAWA.

Hon. President, Miss M. A. Catton; President, Miss Gertrude P. Garvin, Isolation Hospital; Vice-President, Mrs. L. M. Dawson; Recording Secretary, Mrs. D. S. Johnston; Corresponding Secretary, Miss Gertrude M. Bennett, Royal Ottawa Sanitarium; Treasurer, Mrs. A. J. Nettleton, 165 Florence St.

Members of Executive and Convenors of Committees—Membership, Mrs. C. J. McPherson; Sick Visiting, Mrs. Geo. Brown; Programme, Miss M. C. MacDonald; Nominating, Miss L. C. Stevens; "Canadian Nurse," Miss M. Chipman, Miss E. V. O'Reilly.

Representatives to Local Council of Women are the officers.

Meeting, Third Thursday at 8 p.m.

LADY STANLEY INSTITUTE ALUMNAE ASSOCIATION, OTTAWA
(Incorporated 1918) Officers 1922-1923

Hon. President, Miss Mary A. Catton, Superintendent of Nurses, Lady Stanley Institute; President, Mrs. C. T. Ballantyne, 191 Rideau St., Ottawa; Vice-President, Miss Mae McCreary; Secretary, Miss Hazel A. Johnson, 633 Rideau St., Ottawa; Treasurer, Miss Jean Blyth; Directors, Miss Annie Ebb, Miss McNiece, Mrs. Waddell.

Representative "Canadian Nurse" Magazine, Miss Mary Sluin, 204 Stanley Avenue, Ottawa.

BELLEVILLE GENERAL HOSPITAL ALUMNAE ASSOCIATION
(Affiliated Members of G. N. A. of Ontario)

President, Miss Evelyn Cunningham, 39 Yeoman Street; Vice-President, Miss R. Fimnie, 463 George Street; Secretary-Treasurer, Miss Edna M. Howard, 27 Victoria Avenue; Corresponding Secretary, Miss Leapha B. Clarke, 27 Victoria Avenue.

Advisory Board—Conveners: Mrs. Leavens, George Street, Belleville, Ont.; Mrs. M. Graham, 642 Shaw Street, Toronto, Ont.; Mrs. R. Coulter, Stirling, Ont.; Mrs. Warrell, Picton, Ont.

GRADUATE NURSES' ASSOCIATION OF ONTARIO
Incorporated 1908. Officers 1922-23

President, Miss E. J. Jamieson, 13 Oaklands Ave., Toronto; First Vice-President, Mrs. A. C. Joseph, London, Ont.; Second Vice-President, Miss Jean I. Gunn, Toronto; Secretary-Treasurer, Miss Beatrice L. Ellis, 19 Division St., Toronto.

Directors—Miss E. H. Dyke, Toronto; Miss Mary Irene Foy, Toronto; Miss Agnes Malloch, London; Miss E. Gaskell, Toronto; Miss Helen Carruthers, Toronto; Miss K. Mathieson, Toronto; Mrs. J. B. Belger, Kitchener; Miss Hanna, Hamilton; Miss McArthur, Owen Sound; Mrs. Anderson, Ottawa; Miss E. Cook, Toronto; Miss Forgie, Claremont; Miss H. Lovick, Kingston; Miss Davidson, Peterboro; Miss E. MacP. Dickson, Weston; Miss Margaret Hall, Brantford.

Dangers of Constipation No. 2—

Dilatation *and* Spasticity

Diseased Colon, darkest portion shows dilatation; arrows indicate spastic condition.

A COMMON form of intestinal constipation is dilatation and spasticity of the colon.

A prominent medical authority states that laxatives of all sorts increase the spasticity of the intestine. Whereas, liquid petrolatum lubricates and protects the sensitive surface of the spastic bowel, at the same time softening the intestinal contents so as to permit passage through the bowel without mechanical irritation.

Nurses can administer Nujol with every confidence in its suitability to all forms of constipation. The action of Nujol closely resembles that of the natural lubricating mucus secreted in the bowel, which is deficient when constipation exists. Nujol takes its place, lubricates the bowel contents and so assists their expulsion from the body. As Nujol is not a laxative it cannot gripe. And like pure water it is harmless and pleasant. Nujol is prescribed by physicians and is used in leading hospitals throughout the world.

Send for nurse's sample and special 16-page booklet, "On a Case", to Nujol Laboratories, Standard Oil Co. (New Jersey), Room No. 706 44 Beaver Street, New York.

For Constipation

Nujol

Trade Mark

A Lubricant; not a Laxative

Normal Colon, made distinct by means of barium meal.

THE KITCHENER AND WATERLOO GRADUATE NURSES' ASSOCIATION.

President, Mrs. Geo. Smith; First Vice-President, Miss V. Winterhalt; Second Vice-President, Miss Laura Hummel; Secretary, Miss Florence Wolfe; Treasurer, Miss Ada Weseloh.

Representative to Canadian Nurse—Miss Georgie DeBus.

KITCHENER AND WATERLOO GENERAL HOSPITAL ALUMNAE ASSOCIATION

President, Mrs. H. M. Lockner; Vice-President, Miss Marre Wunder; Secretary, Miss George DeBus; Treasurer, Miss Maude Carter.

Represantive to "Canadian Nurse"—Miss Ada L. Weseloh.

Regular Meetings—Second Thursday of each Month.

KINGSTON GENERAL HOSPITAL ALUMNAE ASSOCIATION KINGSTON, ONT.

Honorary-President, Miss Emily Baker; President, Mrs. J. C. Spence, 30 Garrett Street, Kingston; First Vice-President, Mrs. G. H. Leggett; Second Vice-President, Miss Pearl Martin; Secretary, Miss Lily Rogers, R.R. No. 1, Kingston; Treasurer, Mrs. Chas. Mallory, 291 Johnston Street, Kingston; Assistant-Treasurer, Mrs. H. E. Pense; Registry Treasurer, Miss Neish, 308 University Avenue, Kingston.

"Canadian Nurse" and Press Representative, Mrs. Kenneth Carson, 150 King Street, Kingston.

KINGSTON CHAPTER GRADUATE NURSES' ASSOCIATION.

President, Miss Maud Abernethy; Vice-President, Mrs. Sam Crawford; Secretary-Treasurer, Mrs. L. M. Robinson, 80 Beverley Street, Kingston; Assistant-Treasurer, Mrs. Fannie Robinson; Press Reresentative, Miss H. Lovick; Convener Sick Committee, Miss G. Hiscock; Convener Social Committee, Mrs. Stuart Crawford.

NICHOLLS' HOSPITAL ALUMNAE ASSOCIATION, PETERBORO, ONT.

Honorary-President, Mrs. E. M. Lesson, Superintendent Nicholls' Hospital; President, Miss F. Dixon, 216 McDonald Street; First Vice-President, Miss E. Walsh, 317 Margaret Avenue; Second Vice-President, Miss E. Davidson, 563 Park Street; Secretary, Miss E. Archer, Assistant Superintendent Nicholls' Hospital; Treasurer, Mrs. L. A. Law, 295 Simcoe Street.

"Canadian Nurse" Representative, Miss O. Waterman, Nicholls' Hospital.

THE ALUMNAE ASSOCIATION OF ST. JOSEPH'S HOSPITAL, HAMILTON

Hon. President, Mother M. St. Basil; President, Miss E. Kelly, 250 Hughson Street, North; Vice-President, Miss G. Boyes, 17 East Avenue, South; Secretary, Miss M. McClarty, 59 East Avenue, North; Treasurer, Miss A. Maloney, 31 Erie Avenue; Corresponding Secretary, Miss M. Grant, 807 King Street, East.

Executive Committee—Misses Egan, Furey, Dermody, Nally and Murray.

Entertainment Committee—E. McClarty, E. Downey, E. Bedford, E. Galloway.

Sick Visiting Committee—Misses H. Fagan and A. Brohman.

Representative to Central Registry—Miss T. Gurry.

Representative on "Canadian Nurse"—Miss E. Dermody, 157 Catherine St., South.

Regular Meeting—First Tuesday, 4 p.m.

HAMILTON CHAPTER OF THE GRADUATE NURSES' ASSOCIATION OF ONTARIO

Chairman, Miss Laidlaw, 212 James Street S.; First Vice-President, Miss G. Boyes, 17 East Avenue S.; Second Vice-President, Miss Ida Carr; Secretary, Miss A. McGinnity, 807 King Street E.; Treasurer, Miss E. Aitken, 244 Main Street E.

Executive Committee—Mrs. Reynolds, Miss Dermody, Miss Insole

Representatives to the Local Council of Women—Miss Beckett, Miss Nagle, Miss Dermody.

MeetingsFourth Wednesday of every second month, omitting July.

The Neurological Institute of New York

offers a six months' Post Graduate Course to Nurses. Thorough practical and theoretical instruction will be given in the conduct of nervous diseases, especially in the application of water, heat, light, electricity, suggestion and re-education as curative measures.

$30.00 a month will be paid, together with board, lodging and laundry. Application to be made to Miss G. M. Dwyer, R.N., Supervisor of Nurses, 149 East 67th St., New York City.

THE

Graduate Nurses' Registry and Club

Phone Seymour 5834
Day and Night

Registrar—Miss Archibald

601, 13th AVENUE, WEST
Vancouver, B.C.

JAEGER
Fine Pure Wool

Undergarments

Jaeger Undergarments are made in all weights for all seasons. They are carefully woven from pure undyed wool of the finest, smoothest and strongest texture. Made in all sizes for men, women and children.

A fully illustrated catalogue free on application.

For Sale at Jaeger Stores and Agencies throughout Canada.

The JAEGER CO., Limited

TORONTO MONTREAL WINNIPEG

10

Obstetric Nursing

THE CHICAGO LYING-IN HOSPITAL offers a four-months' post-graduate course in obstetric nursing to graduates of accredited training schools connected with general hospitals, giving not less than two years' training.

The course comprises practical and didactic work in the hospital and practical work in the Out Department connected with it. On the satisfactory completion of the service a certificate is given the nurse.

Board, room and laundry are furnished and an allowance of $10.00 per month to cover incidental expense.

Affiliations with accredited Training Schools are desired, as follows:

A four-months' course to be given to pupils of accredited training schools associated with general hospitals.

Only pupils who have completed their surgical training can be accepted.

Pupil nurses receive board, room and laundry and an allowance of $5.00 per month.

ADDRESS:

Chicago Lying-in Hospital and Dispensary

426 East 51st Street, CHICAGO

THE ALUMNAE ASSOCIATION OF THE HAMILTON GENERAL HOSPITAL TRAINING SCHOOL FOR NURSES

Honorary President, Miss Grace Fairley, Hamilton General Hospital; President, Miss May Brennen, Hamilton General Hospital; Vice-President, Miss Betty Aiken, 549 Main Street East; Secretary, Miss Minnie Pegg, 152 James Street; Corresponding Secretary, Miss Newbigging, 129 Herkimer Street; Treasurer, Mrs. Hagarth, 98 Leeming Street; "Canadian Nurse" Correspondent, Miss R. Burnett, 25 Spadina Avenue.

Executive Committee—Miss K. Peart, Hamilton General Hospital; Miss Vance, 101 West Avenue North; Miss Champ, 11 Nightingale Street; Miss Servos, 25 Arthur Avenue South; Miss Harley, 98 Leeming Street.

Representatives to National Council of Women—Miss E. Taylor, Mrs. Newson, Miss B. Aiken. Representatives to Central Registry—Mrs. Reynolds, Miss Pegg, Miss Roadhouse, Miss A. P. Kerr. Sick Committee—Miss A. P. Kerr, Miss M. E. Dunlop, Mrs. Reynolds, Miss R. Burnett, Miss Ainslie, Miss K. Peart.

ALUMNAE ASSOCIATION OF THE BRANTFORD GENERAL HOSPITAL

Officers elected for the coming year are as follows: Hon. President, Miss M. Forde, Superintendent B.G.H.; 1st Vice-President, Mrs. Caton, 154 Rawdon St.; President, Miss H. Doeringe, 67 Sheridan St.; Secretary, Miss T. Martin, 154 Rawdon St.; Assist. Secretary, Miss J. Edmunsden, Echo Place; Treasurer, Miss E. Jones, Instructress of Nurses, B.G.H.; Canadian Nurse Representative, Miss E. McKay, 121 Market St.; Flower Committee, Miss T. Westbrooke, 215 Chatham St., and Miss J. Wilson, 59 Dufferin Ave.

ALUMNAE ASSOCIATION OF THE MACK TRAINING SCHOOL, GENERAL AND MARINE HOSPITAL, ST. CATHARINES, ONT.

Honorary-President, Miss Uren; President, Mrs. Jas. Parnell, 124 Lake St., St. Catharines; First Vice-President, Miss Carolyn Freel; Second Vice-President, Mrs. R. L. Dunn; Secretary, Miss Ethel Rawlings, General and Marine Hospital; Treasurer, Mrs. Willard Durham, R.R. No. 4, St. Catharines; Auditors, Miss Edna Atkinson and Miss Vera Calvert.

Canadian Nurse Representative—Miss Maysie Marriott.

Programme Committee—Misses Moyer, Freel, McGinnis, Rawlings, Buchanan and Honey.

Regular Monthly Meeting—Last Tuesday, at 2:30 p.m.

THE ALUMNAE ASSOCIATION OF THE AMASA WOOD HOSPITAL TRAINING SCHOOL FOR NURSES, ST. THOMAS, ONTARIO

President, Miss Anabell Nicol, 91 Kains Street; Vice-President, Miss Ruth Mackey, 91 Kains Street; Recording and Corresponding Secretary, Miss Pearl Dean, 5 Naama Street; Treasurer, Miss Sadie Coulthard, 20 Hughes Street.

Executive Committee—Misses Cook, Malcolm, Bennett, Crane and Mills.

Representative to "Canadian Nurse"—Miss Myrtle Bennett, 71 Hincks Street.

Regular Meeting—Second Wednesday, 8 p.m.

THE ALUMNAE ASSOCIATION OF ST. JOSEPH'S HOSPITAL, CHATHAM, ONTARIO

Honorary President, Sister M. Regis; Honorary-Director, Sister M. Lorette; President, Miss E. Belleperche, Ford City, Ontario; First Vice-President, Miss Hazel Gray, Chatham, Ontario; Recording-Secretary, Miss Isabel Doyle, Walkerville, Ontario; Secretary-Treasurer, Miss Margaret Lydon, Detroit; Local Secretary, Miss P. O'Rourke, Chatham, Ontario.

Canadian Nurse Representative—Miss N. Casey, Chatham, Ontario.

Regular Meeting—First Monday, 3 p.m.

THE ALUMNAE ASSOCIATION OF THE TORONTO ORTHOPEDIC HOSPITAL TRAINING SCHOOL FOR NURSES

Honorary-President, Miss E. MacLean; President, Mrs. W. E. Ogden, 9 Spadina Road; Vice-President, Miss Agnes Bodley; Secretary-Treasurer, Mrs. W. J. Smither, 40 Wellesley Street (N6257-W.).

Regular Meeting—Fourth Friday of each alternate month, at 8 p.m.

THE ALUMNAE ASSOCIATION OF VICTORIA HOSPITAL TRAINING SCHOOL FOR NURSES, LONDON, ONTARIO

President, Miss Agnes Malloch, 784 Colborne St.; First Vice-President, Miss Annie McKenzie; Second Vice-President, Miss Mabel Laur; Secretary, Miss Beatrice Smith, 95 High St.; Treasurer, Mrs. Walter Cummins, 95 High St.

Representative for "Canadian Nurse"—Mrs. A. C. Joseph, 499 Oxford St.

Representatives to Local Council of Women—Mrs. J. Stapleton, Mrs. F. McLachlin, Miss F. B. McGugan and Miss E. Raymond.

Representatives to Social Service Council—Mrs. M. Patterson, Mrs. W. Cummins, Mrs. A. C. Joseph and Miss Ada Brown.

Advisory Committee—Mrs. Gibson, Misses Mortimer, Bice, McPherson, McMillan and Guest.

Programme Committee—Mrs. Eyre, Misses White, Ashplant, Foster and McLaurin.

Sick-Visiting Committee—Misses Cockburn, Sumner, Rinn and Grey.

Regular monthly meeting—First Tuesday, at 8 p. m.

THE ALUMNAE ASSOCIATION OF ST. JOSEPH'S HOSPITAL, LONDON, ONTARIO.

Honorary President, Mother M. St. Roch, St. Joseph's Hospital; Honorary Vice-President, Sister M. Patricia, St. Joseph's Hospital; President, Miss Alice Butler, 73 Holman St., London; First Vice-President, Miss Margaret Hewey, 475 York St., London; Second Vice-President, Miss Emma Harkness, 51 St. George St., London; Secretary-Treasurer, Mrs. W. C. Dodd, 403 Mackenzie Avenue, London; Recording Secretary, Miss Ruth Stephenson, 441 Pall Mall St., London; Correspondent to Canadian Nurse—Miss Stephenson.

THE ALUMNAE ASSOCIATION OF THE WOODSTOCK GENERAL HOSPITAL TRAINING SCHOOL FOR NURSES

Honorary President, Miss Frances Sharpe; President, Miss Nora Montgomery; Vice-President, Miss Gladys Mill; Recording-Secretary, Miss M. H. Mackay, R.N.; Assistant Secretary, Miss Annie Hill; Corresponding Secretary, Miss Gladys Jefferson; Treasurer, Miss Evelyn Peers.

Regular Monthly Meeting—Second Monday, at 8 p.m.

THE ALUMNAE ASSOCIATION, TORONTO FREE HOSPITAL TRAINING SCHOOL FOR NURSES, WESTON, ONT.

Hon. President, Miss E. MacP. Dickson; President, Miss Jean Bryden, 550 Gerrard Street, East, Toronto; Vice-President, Miss U. Leroux; Secretary, Miss Mabel Avery, Toronto Free Hospital, Weston; Treasurer, Miss Cora Beckwith, Toronto Free Hospital, Weston.

Regular Meetings—Second Friday of each alternate month.

THE ALUMNAE ASSOCIATION OF THE WELLESLEY HOSPITAL TRAINING SCHOOL FOR NURSES, TORONTO

Hon. President, Miss Elizabeth Flaws; President, Miss Jessie Ritchie; Vice-President, Miss Edith MacNamara; Secretary, Miss Vira Malone, 168 Isabella St., Toronto; Treasurer, Miss Annis Carson.

THE TORONTO CHAPTER OF THE GRADUATE NURSES' ASSOCIATION OF ONTARIO.

President, Miss Russell, 1 Queen's Park (N.8760); Vice-President, Miss Emory, Room 308, City Hall; Corresponding Secretary, Miss Barnes, 615 Huron Street (A.8022); Recording Secretary, Miss Hamilton, 130 Dunn Avenue; Treasurer, Miss Rowan, 496 Euclid Avenue; G. N. A. O. Representative—Miss Patterson, 14 Gloucester Street; Local Council Representatives—Miss Haslett, 48 Howland Avenue; Mrs. Smither, 40 Wellesly Street; Mrs. Turnbull, 149 Crescent Road; Miss Holland, 410 Sherbourne Street. Programme Committee—Miss Davidson, 322 Brunswick Ave.; Miss Henderson, 128 Barton Ave.; Miss Spademan, 591 Concord Ave. Press and Publication Committee—Mrs. A. W. McClennan, Convenor, 436 Palmerston Blvd.; Miss Ferguson, 125 Isabella Street. Legislation Committee—Miss Dean, 103 Baldwin Street. Citizenship Committee—Mrs. Smither, 40 Wellesley Street; Mrs. Turnbull, 149 Crescent Road.

THE ALUMNAE ASSOCIATION, RIVERDALE HOSPITAL, TORONTO

President, Miss I. Nicol, 767 Gerrard Street East, Toronto, Ontario; First Vice-President, Miss Armstrong, Riverdale Isolation Hospital, Toronto; Second Vice-President, Miss P. Pierce, Riverdale Isolation Hospital, Toronto; Secretary, Miss G. Gastrell, Riverdale Isolation Hospital, Toronto; Treasurer, Miss R. Shields, Riverdale Isolation Hospital, Toronto; Convener of Sick and Visiting Committee, Mrs. Paton, 23 Crang Avenue, Toronto.

Representatives to Central Registry, Miss A. Davidson, 322 Brunswick Avenue, Toronto; Miss I. Vincent, 96 Simpson Avenue, Toronto.

Programme Committee, Miss O. Hatley, Riverdale Isolation Hospital, Toronto; Miss Craig, Riverdale Isolation Hospital, Toronto; Mrs. White, 85 Mairn Avenue Toronto.

Representative to Toronto Chapter, Miss A. Davidson, 322 Brunswick Avenue, Toronto.

Board of Directors and Officers, Miss E. Scott, 342 Shaw Street, Toronto; Miss L. Whitlam, 35 DeLisle Avenue, Toronto; Miss G. Honey, Riverdale Isolation Hospital, Toronto; Miss C. Field, Riverdale Isolation Hospital, Toronto.

Press Representative, Secretary.

STRATFORD GENERAL HOSPITAL ALUMNAE ASSOCIATION

Hon. President, Miss A. Mann; President, Miss A. Keeler; 1st Vice-President, Miss M. Derby; 2nd Vice-President, Miss L. Culbert; Secretary-Treasurer, Miss F. Cavell. Convenor of Social Committee, Miss M. Bullard. Representative to "Canadian Nurse", Miss F. Cavell.

OFFICERS OF THE TORONTO GENERAL HOSPITAL ALUMNAE ASSOCIATION FOR 1922-23

Honorary President, Miss Sniveley, 50 Maitland St.; President, Miss Hannant, 24 Glen Road; First Vice-President, Miss E. Hickey, 19 Sparkhall Ave.; Second Vice-President, Miss M. Mann, Toronto General Hospital; Recording Secretary, Miss F. Jones 30 Vermont Ave.; Corresponding Secretary, Miss M. Martin, 26 Summerhill Ave.; Treasurers, Misses H. Mortimer and C. Wheatley, Toronto General Hospital.

Councillors—Miss E. Moore, Spadina House; Miss L. Gamble, 31 Claremont St.; Miss E. Cryderman, 139 Jarvis St.

Representative to Toronto Chapter—Miss K. Russel, 1 Queen's Park.

THE FLORENCE NIGHTINGALE ASSOCIATION OF TORONTO

President, Miss J. I. Gunn, Toronto General Hospital; Vice-President, Miss E. Campbell, Victorian Order of Nurses, 281 Sherbourne Street; Secretary, Miss H. G. R. Locke, Toronto General Hospital; Treasurer, Miss E. Macallum, 108 Avenue Road, Toronto. Councillors—Miss J. Allison, Mrs. H. M. Bowman, Mrs. M. Cadenhead, Miss H. Kelly, Miss F. Kingston, Miss H. McMurrich, Miss E. Patterson, Mrs. J. Turnbull.

THE ALUMNAE ASSOCIATION OF ST. MICHAEL'S HOSPITAL, TORONTO

Hon. President, Rev. Mother Alberta; President, Miss Amelia Cahill, 87 Wilson Ave., Toronto; First Vice-President, Miss C. McBride; Second Vice-President, Miss J. B. O'Connor; Third Vice-President, Miss T. Huntley; Corresponding Secretary, Miss M. I. Foy, 163 Concord Ave., Toronto, Ont.; Recording Secretary, Miss G. Coyle; Treasurer, Miss F. McMahon, 853 Bathurst St., Toronto. Board of Directors, Miss M. T. Rowan, Miss A. O'Meara, Mrs. T. Shanley.

Press Representative—Miss A. M. Connor, 84 Moore Ave., Toronto, Ont.

Regular Meeting—Second Monday of each month.

THE ALUMNAE ASSOCIATION OF GRACE HOSPITAL, TORONTO

Hon. President, Mrs. Curry; President, Miss Edge; 1st Vice-President, Miss Emory; 2nd. Vice-President, Miss Browne; Treasurer, Mrs. Aitken; Recording Secretary, Miss Garrow; Corresponding Secretary, Miss Spargo, 388 Sunnyside Ave.

Board of Directors—Misses Rowan, Rutherford, Henderson, Devellen and Dyer.

Convenors of Committees—Press and Publication, Miss Goodman; Programme, Miss Dowdell; Social, Miss Ogilvie; Sick, Miss Bates.

OFFICERS OF ALUMNAE ASSOCIATION OF ST. JOHN'S HOSPITAL, TORONTO

Hon. President, Sister Beatrice; Superintendent President, Miss E. R. Price, 27 Irwin Avenue, Toronto; Vice-President, Miss F. M. Elliot, 93 Erskin Avenue, Toronto; Secretary, Miss M. Niblett, 510 Markham Street, Toronto; Treasurer, Miss Bertha Welsh, 622 Spadina Avenue, Toronto.

Press Representative, Miss Carol Schrieber.

Representatives to Central Registry, Miss Burnett and Miss Elliot.

THE ALUMNAE ASSOCIATION OF GRANT MACDONALD TRAINING SCHOOL FOR NURSES, TORONTO, ONT.

President, Miss Margaret Ferriman, 78 Herbert Street, Toronto; Vice-President, Miss Esther M. Cook, 130 Dunn Avenue, Toronto, Ont.; Secretary and Treasurer, Miss Helena Hamilton, 130 Dunn Avenue, Toronto; Press Representative, Miss Lendrum, 130 Dunn Avenue, Toronto.

Entertainment Committee—Misses Lawson and Vallick.

Regular Meeting—First Friday, 7.30 p.m.

THE ALUMNAE ASSOCIATION, HOSPITAL FOR SICK CHILDREN TRAINING SCHOOL FOR NURSES, TORONTO

Hon. Pres., Mrs. Godson; Hon. Vice-Pres., Miss Florence J. Potts; Pres., Mrs. G. C. Storey, 64 Evelyn Ave., Toronto; 1st Vice-Pres., Miss Eleanor Butterfield; 2nd Vice-Pres., Mrs. G. Boyer; Cor. Secretary, Miss A. Grindley, 544 Huron St.; Rec. Secretary, Mrs. C. F. Rogers; Treas., Miss M. Fitzgerald, 41 Willard Ave., Toronto. Rep. to "Canadian Nurse"—Mrs. J. W. Reddick, 18 Keewatin Ave., Toronto. Rep. to Toronto Chapter G. N. A. O.—Miss F. Barnes. Sick Visiting Committee—Miss Teeter, Miss Backus and Miss Isaacs. Social Committee—Mrs. Langford. Programme Committee—Miss Minty.

TORONTO WESTERN HOSPITAL ALUMNAE ASSOCIATION

Honorary-President, Miss E. Muriel McKee; President, Miss Jessie Cooper, 754 Bathurst Street; Vice-President, Miss Grace Sutton; Secretary-Treasurer, Mrs. Ethel Bell, 71 Indian Road Cr.; Recording-Secretary, Mrs. Elizabeth Duff; Representative to Toronto Chapter, Miss Mary Butchart; Representative to "Canadian Nurse," Mrs. Alex. Huston, 59 St. Clair Avenue, East; Visiting Committee, Miss Shanbrook, Miss Malcolm; Alumnae Ward, Miss Ella McDougall. Councillors, Mrs. Annie Yorke, Mrs. I. P. MacConnell, Mrs. G. F. Gilroy, Miss May Anderson, Miss E. Shortreed, Miss Hill. Regular meetings First Friday of each month in Assembly Hall of Hospital.

THE ALUMNAE ASSOCIATION OF THE WOMEN'S COLLEGE HOSPITAL, TORONTO, ONTARIO

Honorary President, Mrs. H. M. T. Bowman, R.N.; President, Miss Worth, 2 Leuty Avenue, Toronto; Vice-President, Miss Spademan, 591 Concord Avenue; Recording Secretary, Miss Holden, Women's College Hospital; Corresponding Secretary, Miss Turner, 20 Skipper Avenue, Toronto; Treasurer, Miss Chalk, Women's College Hospital; Executive Committee—Miss A. McClintock, Miss L. Ashcroft; Sick Visiting Committee, Mrs. Scullion.

Executive Committee—Miss Ennis and Miss Mallock.

THE SAULT STE. MARIE GENERAL HOSPITAL ALUMNAE ASSOCIATION.

Honorary President, Rev. Sister Mary Dorothea, General Hospital, Soo, Ontario; President, Miss Dorothea Buzzo, John Street, Soo, Michigan; First Vice-President, Mrs. J. O'Driscoll, 142 Pim Street, Soo, Ontario; Second Vice-President, Miss Stella Kehoe, 225 Albert St., W., Soo, Ontario; Secretary, Mrs. Frank J. McGue, 15 Putney Road, Soo, Ontario; Treasurer, Miss Daisy Kennedy, 176 Pim Street, Soo, Ontario.

THE ALUMNAE ASSOCIATION OF THE ROYAL ALEXANDRA HOSPITAL, FERGUS, ONTARIO.

Honorary President, Mrs. Wickle, R. N., Fergus Hospital; President, Miss Helen Campbell, Woman's College Hospital, Toronto, Ont.; Vice-President, Miss Elizabeth Hansen, Christie Street Military Hospital, Toronto; Second Vice-President, Mrs. A. Hutchison, Fergus; Recording Secretary, Miss Marion Petty, Royal Alexandra Hospital, Fergus, Ontario; Corresponding Secretary, Miss Jean Derby, Victorian Order, 281 Sherbourne St., Toronto, Ont.; Treasurer, Miss Bertha Brillinger, 1725 Dufferin St., Toronto, Ont.

Press Representative—Miss Jean Campbell, 72 Hendrick Ave., Toronto, Ont.

Regular Meeting—First Monday of every month.

GUELPH GENERAL HOSPITAL ALUMNAE ASSOCIATION.

Hon. President, Mrs. J. E. Swancar; President, Miss A. Moore; 1st Vice-President, Miss J. Anderson; 2nd Vice-President, Miss M. Tolton; Treasurer, Mrs. A. Anderson; Secretary, Miss E. M. Eby; Correspondent for "Canadian Nurse", Miss H. Young; Flower Committee, Miss B. Richardson (Convenor), Miss Ferguson and Mrs. Galbraith.

OSHAWA HOSPITAL ALUMNAE ASSOCIATION, OSHAWA, ONTARIO

Hon. Pres., Miss E. Mae Williams, Supt. General Hospital, Oshawa; President, Mrs. Mary Young; Vice-Pres., Miss Ann Scott; Sec-Treas., Miss Emma Seiling; Corresponding Secretary, Miss Isabel Walker.

ALUMNAE ASSOCIATION OF THE OWEN SOUND GENERAL AND MARINE HOSPITAL

Hon. President, Miss J. K. McArthur; President, Miss E. Webster; First Vice-President, Miss I. Forhan; Second Vice-President, Miss H. Falls; Secretary, Miss O. Stewart; Assistant Secretary, Mrs. D. Finlay; Treasurer, Miss S. Myles.

Convener of Programme Committee—Miss Sim.

Convener of Flower and Sick Committee—Miss Falls.

Press and Representative to "Canadian Nurse"—Mrs. D. Finlay.

THE ALUMNAE ASSOCIATION OF ST. BONIFACE HOSPITAL, ST. BONIFACE, MANITOBA

Honorary-President, Rev. Sister Gallant, St. Boniface Hospital; President, Miss Stella Gordon; First Vice-President, Miss Kate Wymbs; Second Vice-President, Mrs. George McDonald; Secretary, Miss L. McEwan, 277 Toronto Street, Winnipeg, Man., Treasurer, Miss M. Mawncott, 486 Clifton Street, Winnipeg, Man.; Convener of Social Committee, Mrs. W. G. McIntosh; Convener of Sick Visiting Committee, Miss M. Herbert; "Canadian Nurse" Magazine Representative, Miss Theresa O'Rourke, 119 Donald Street, Winnipeg..

Regular monthly meeting, second Wednesday, at 8 p.m., in the Hospital Auditorium.

THE MANITOBA ASSOCIATION OF GRADUATE NURSES

President, Miss M. Martin, Winnipeg General Hospital; 1st Vice-Pres., Miss E. Gilroy, Children's Hospital, Winnipeg; 2nd Vice-Pres., Miss S. P. Johnson, Brandon General Hospital; 3rd Vice-Pres., Sister Galland, St. Boniface Hospital; Treasurer, Miss F. Robertson, 753 Wolsely Ave., Winnipeg; Recording Secretary, Miss E. Carruthers, 753 Wolesley Ave., Winnipeg; Cor. Secretary, Miss E. J. Wilson, 798 Grosvenor Ave., Winnipeg.

THE GRADUATE NURSES' ASSOCIATION OF BRANDON

Hon. President, Miss Birtles, Alexander, Man.; President, Mrs. Pearce, 1608 Lorne Ave., Brandon; Vice-President, Mrs. Barager, Mental Hospital; Secretary, Miss Finlayson, Brandon General Hospital; Treasurer, Miss Cannon.

Convener of Registry and Eligibility—Miss C. McLeod.

Sick Visitor—Miss Kid, 12th St., Brandon.

Press Representative—Mrs. W. W. Kid, Suite 14 Imperial Apts., Brandon.